CMS DATA MINISERIES

Session 1:

Overview of CMS & USRDS Data from VIReC

October 10, 2023

Hosted by VIReC

Kristin de Groot, MPH
Project Director, VA/CMS Data for Research Project
VA Information Resource Center (VIReC)

CMS DATA CYBERSEMINAR MINISERIES

Miniseries about the research use of data from Centers for Medicare and Medicaid Services (CMS), which provides information on healthcare Veterans received outside the VA.

Sessions Cover…

- Overview of the types of data available from VIReC
- Methods for using the data in research
- Limitations of the data
- Requirements for access
- Examples of VA research that use these data

UPCOMING CMS DATA SESSIONS

2nd Tuesday of the month (quarterly) 3:00pm-4:00pm ET

Date	Topic
1/9/24	Using Medicaid Data in VA Research

Visit the VIReC Cyberseminars page for more information & registration links.

Visit HSR&D's VIReC Cyberseminar Archive page to watch previous sessions.

Where can I download a copy of the slides?

SAMPLE EMAIL

Host: HSR&D Cyberseminars (cyberseminar@va.gov)
Event number (access code): 199 009 5117
Event password: 3844
Registration ID: This event does not require an enrollment ID

Join event

To join the audio conference only

To receive a call back, provide your phone number when you join the event, or call the number below and enter the access code.
USA Toll Number: 14043971596
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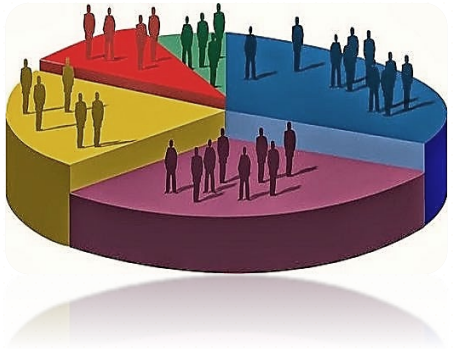
Access code: 199 009 5117

Please download today's slides
Please click here for today's live captions

Poll #1:

*What is your primary **role** in projects using VA data?*

- Investigator, PI, Co-I
- Statistician, methodologist, biostatistician
- Data manager, analyst, or programmer
- Project coordinator
- Other – please describe via the chat function



Poll #2:

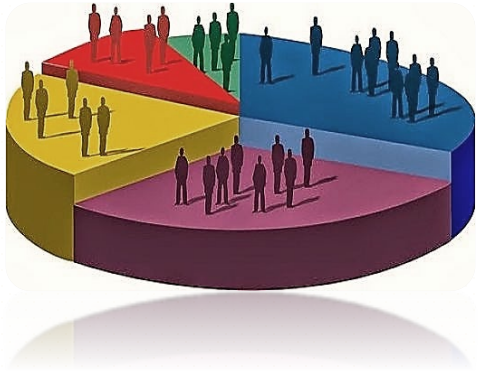
How many years of experience working with VA data?

- None – I'm brand new to this!
- One year or less
- More than 1, less than 3 years
- At least 3, less than 7 years
- At least 7, less than 10 years
- 10 years or more

Poll #3:

What types of CMS data have you used? (Select all that apply)

- Medicare utilization
- Medicaid utilization
- Medicare Advantage HEDIS
- Medicare survey (MCBS)
- Assessment data
- US Renal Data System (USRDS)
- Provider data



Poll #4:

What types of CMS data do you want to learn more about? (Select all that apply)

- Medicare utilization
- Medicaid utilization
- Medicare Advantage HEDIS
- Medicare survey (MCBS)
- Assessment data
- US Renal Data System (USRDS)
- Provider data

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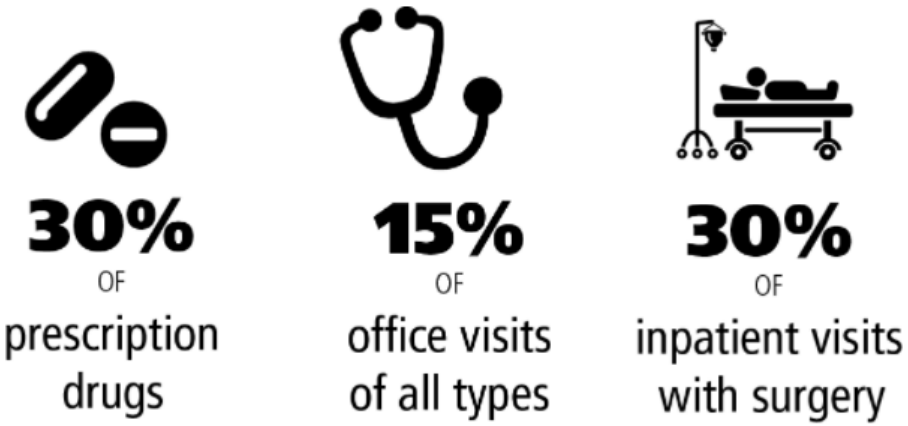
Source of Veterans' Healthcare

In VHA

Figure 3. VA Patients Rely on VA for Only a Part of Their Health Care



Balancing Demand and Supply for Veterans' Health Care. RAND Health Quarterly, 2016; 6(1):12. https://www.rand.org/pubs/periodicals/health-quarterly/issues/v6/n1/12.html

Outside of VHA

- VHA Community Care
- Tricare
- Private Insurance
- Medicare
- Medicaid

Where's the data?

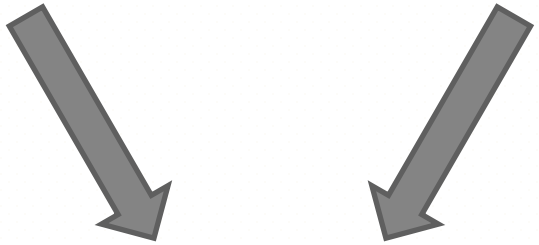
VA Medical Center

VA pays

Community Hospital

VA pays

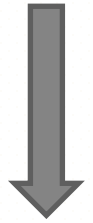
Community Care
Fee Basis
Veteran Choice
Mission Act
Emergencies



VA data

Community Hospital

Medicare or Medicaid pays



CMS data

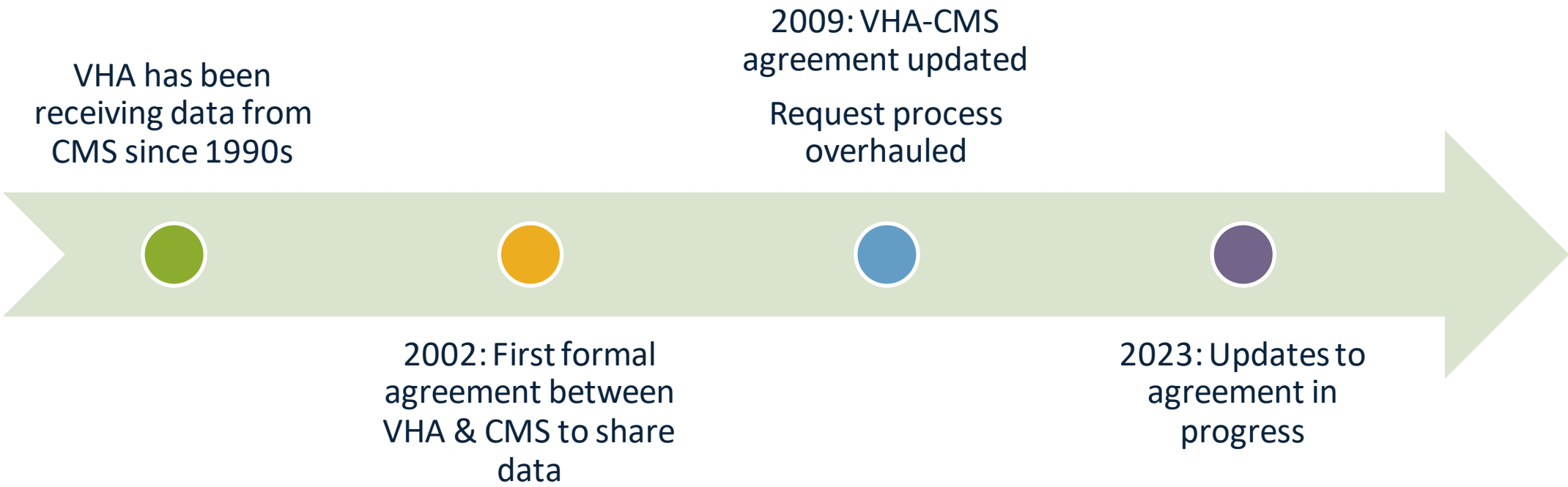
What is CMS?

Centers for Medicare and Medicare Services

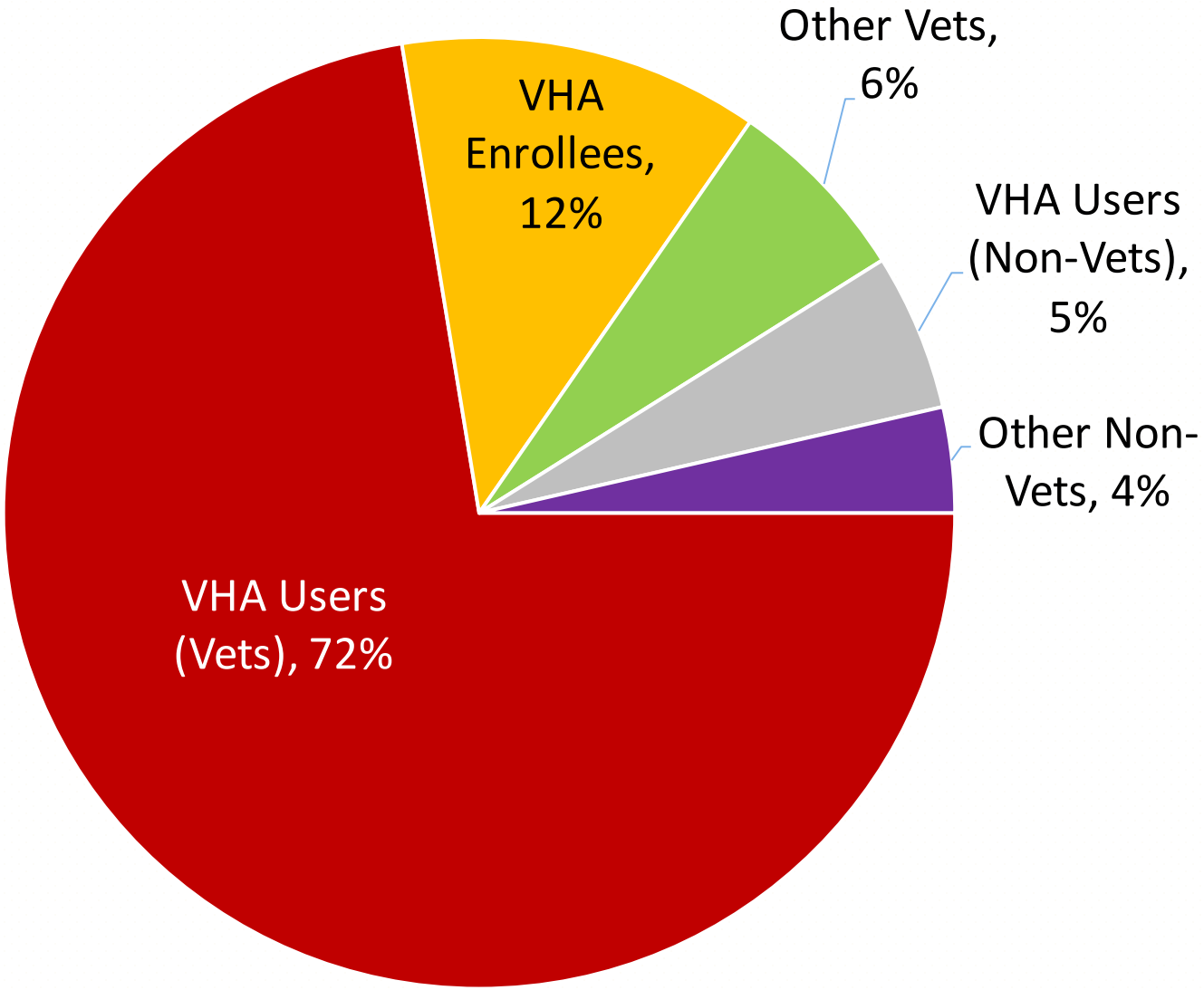
Subagency under Department of Health and Human Services

- Administers & oversees
  - Medicare
  - Federal portion of Medicaid
  - State Children's Health Insurance Program (SCHIP)
  - ACA Marketplace (healthcare.gov)
- Ensures that services are accessible and of high quality
- Develops health and safety standards for providers of health services provided through Medicare & Medicaid
- Health insurance portability standards (HIPAA)
- And more…

History of CMS data in VHA



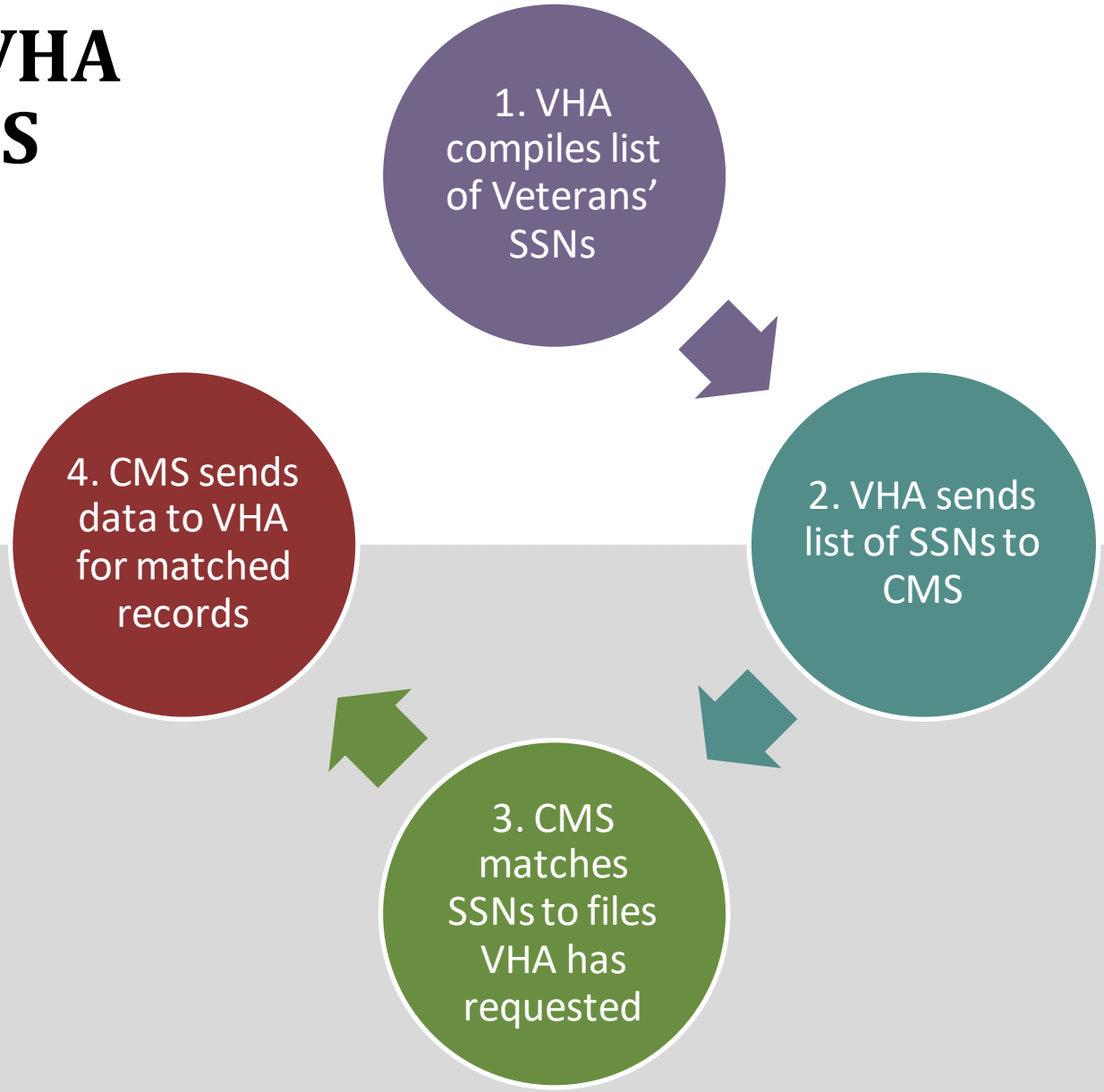
Who's included in the VHA's CMS data?



VHA Cohort

- Does NOT include all Veterans
- Includes
  - VHA users
  - VHA enrollees
  - Some recipients of VA benefits
- Includes some non-Veterans (family members, active DOD)
- Cumulative
- Alive and deceased

Process for VHA to obtain CMS data



Session roadmap

- Medicare & Medicaid Enrollment
- Medicare & Medicaid Utilization
- Other CMS Data
- USRDS Data
- Which files should I use?
- Data AAA (Access, Availability, & Assistance)

Session roadmap

- **Medicare & Medicaid Enrollment**
- Medicare & Medicaid Utilization
- Other CMS Data
- USRDS Data
- Which files should I use?
- Data AAA (Access, Availability, & Assistance)

	Medicare
Administered by	CMS (federal)
Number enrolled (2021)	67 million
Population Covered	Age 65+ Disabled End Stage Renal Disease (ESRD)
Benefits	National set of benefits

	Medicare	Medicaid
Administered by	CMS (federal)	States, with federal (CMS) requirements & funding
Number enrolled (2021)	67 million	102 million
Population Covered	Age 65+ Disabled End Stage Renal Disease (ESRD)	Varies by state, at minimum: Low income children, pregnant women, disabled, elderly
Benefits	National set of benefits	Varies by state, minimum set of benefits set by CMS

	Medicare	Medicaid
Administered by	CMS (federal)	States, with federal (CMS) requirements & funding
Number enrolled (2021)	67 million	13 million dual eligibles 102 million
Population Covered	Age 65+ Disabled End Stage Renal Disease (ESRD)	Varies by state, at minimum: Low income children, pregnant women, disabled, elderly
Benefits	National set of benefits	Varies by state, minimum set of benefits set by CMS

Medicare & Medicaid Dual Eligibles

High rates of chronic illness

- 27% have 6+ chronic conditions (vs 15% non-duals)
- 15% report poor health status (vs 4% non-duals)

Types of benefits

- 71% - full Medicaid benefits
- 29% - partial Medicaid benefits: Medicaid pays Medicare premiums and/or cost sharing (QMB, SLMB, QI, QDWI)

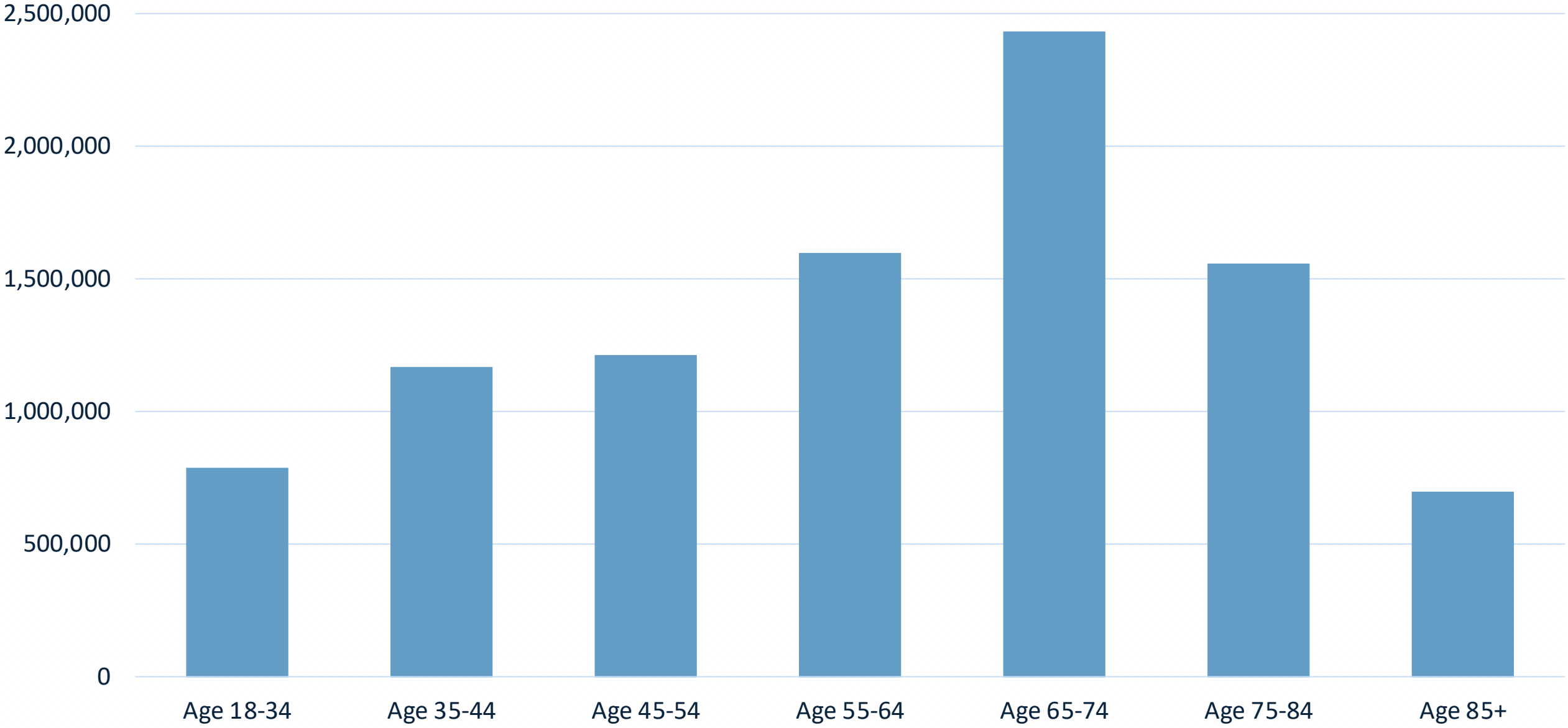
Who pays?

- Medicare pays first
- Medicaid pays for services not covered by Medicare

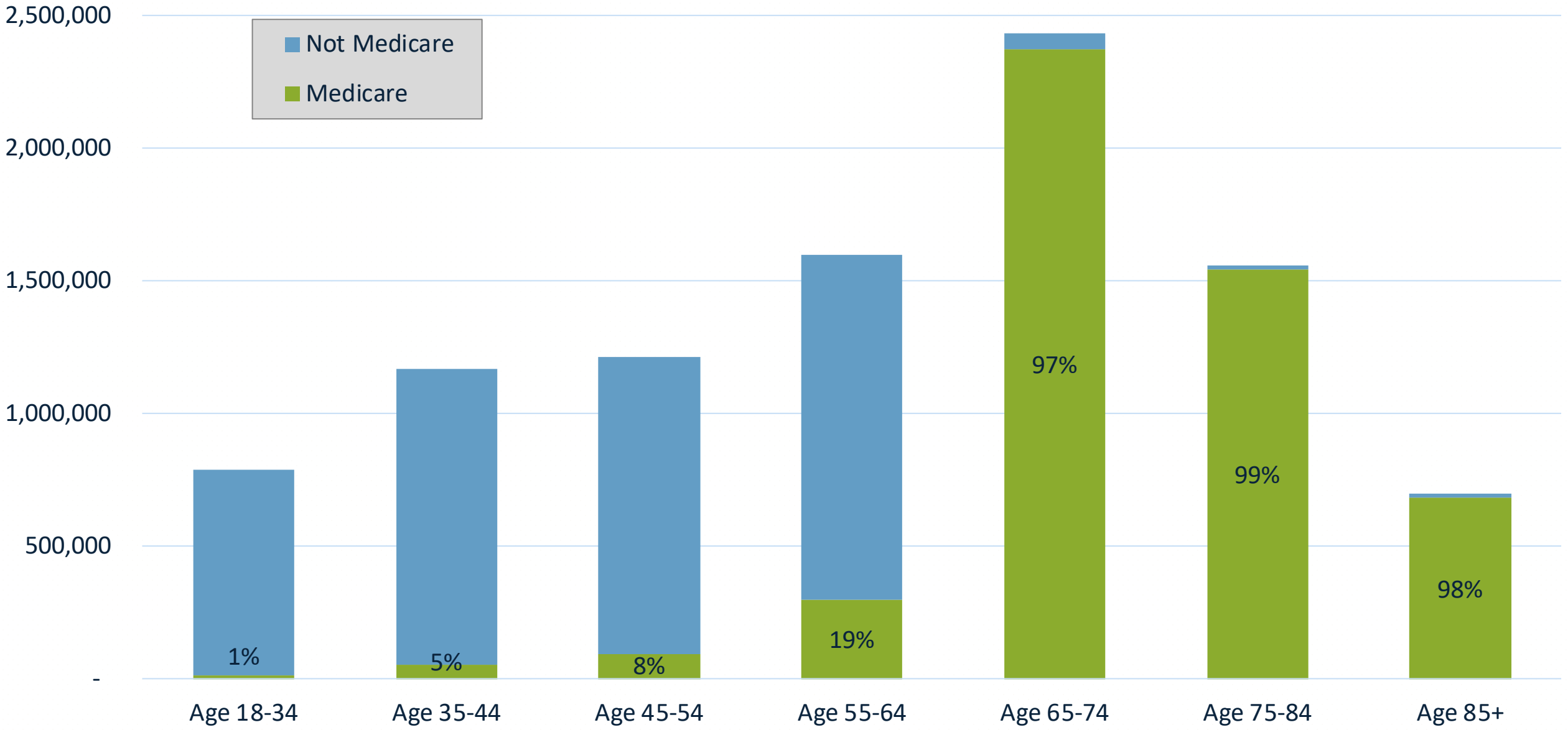
https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/Downloads/MMCO_Factsheet.pdf

Veterans' Enrollment in Medicare & Medicaid

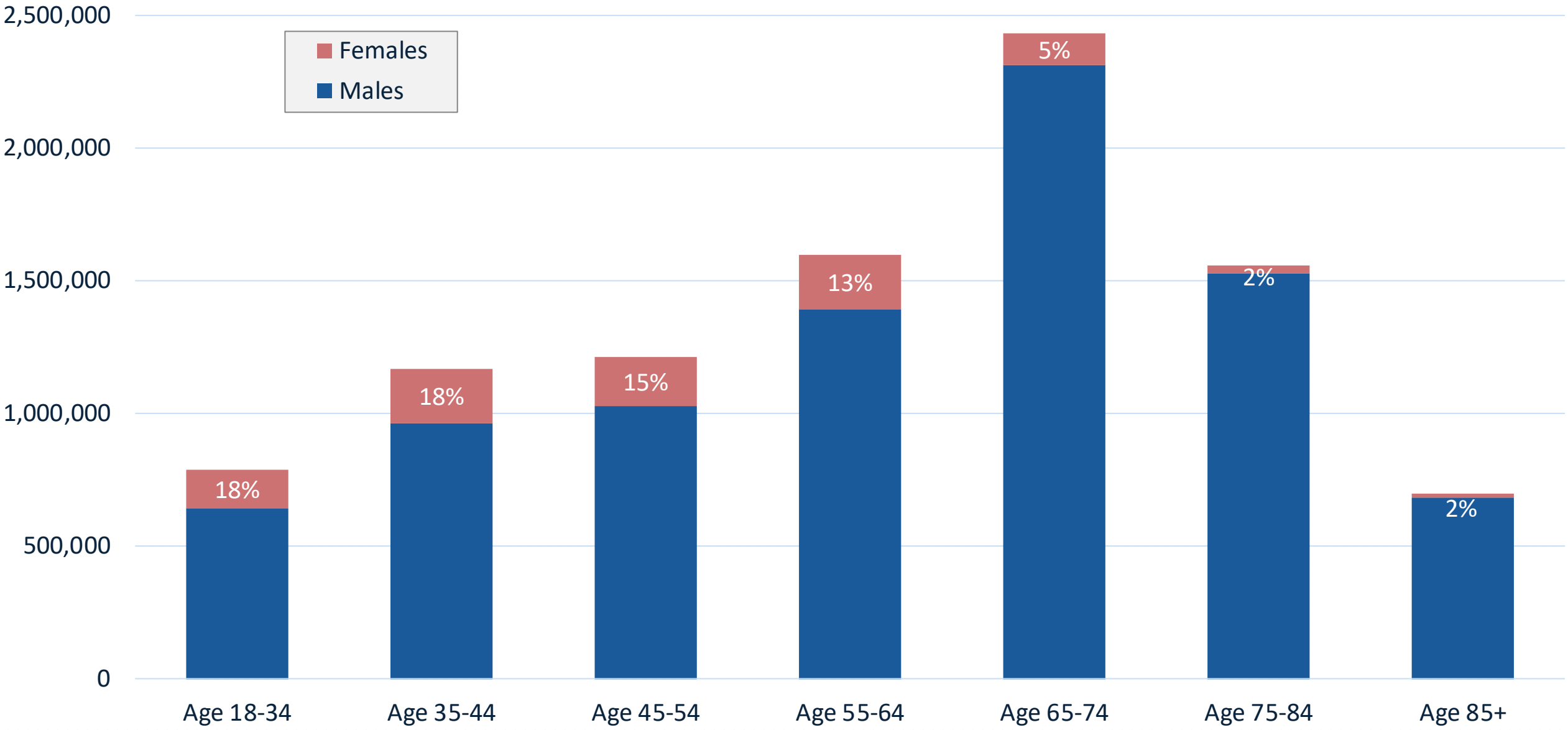
September 2021 VHA enrollees, by age



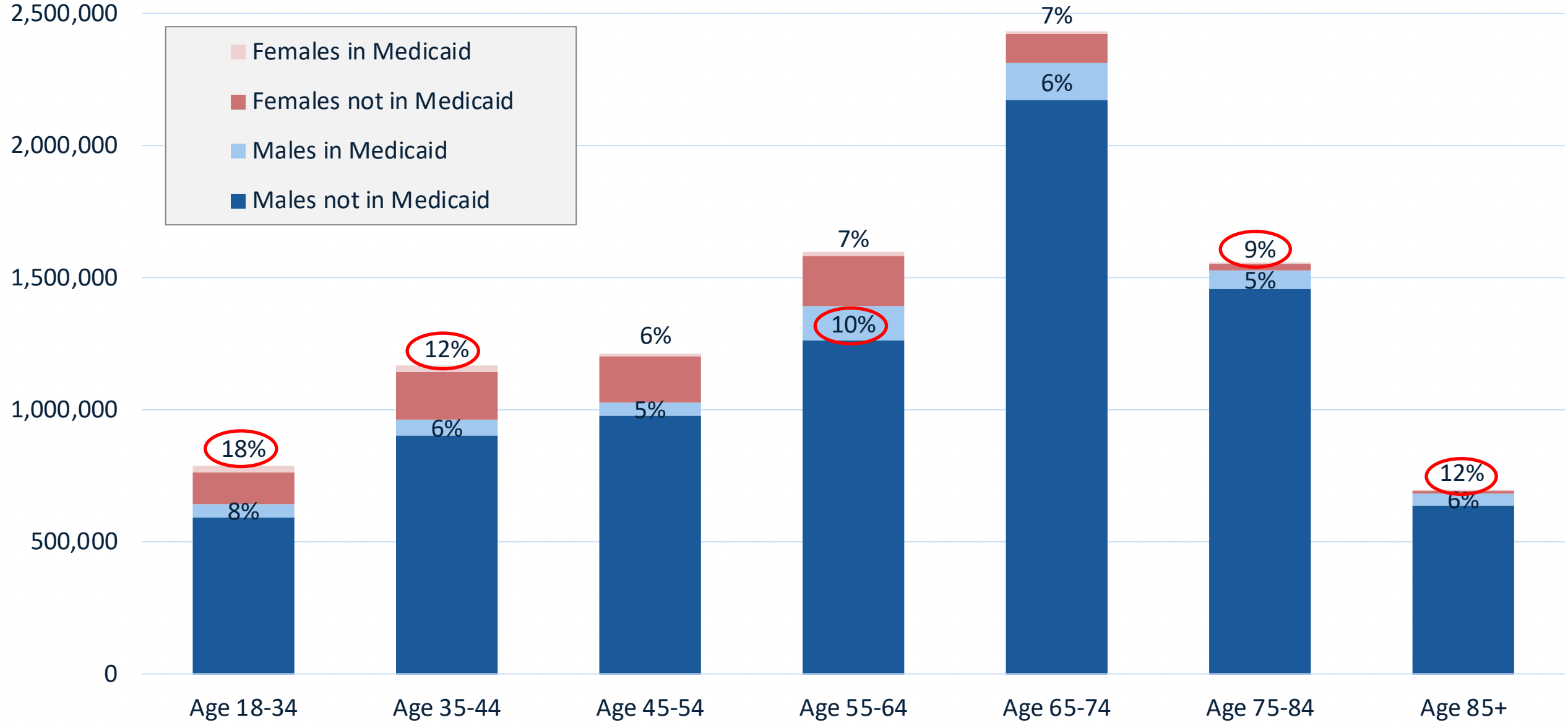
September 2021 VHA enrollees' in Medicare, by age



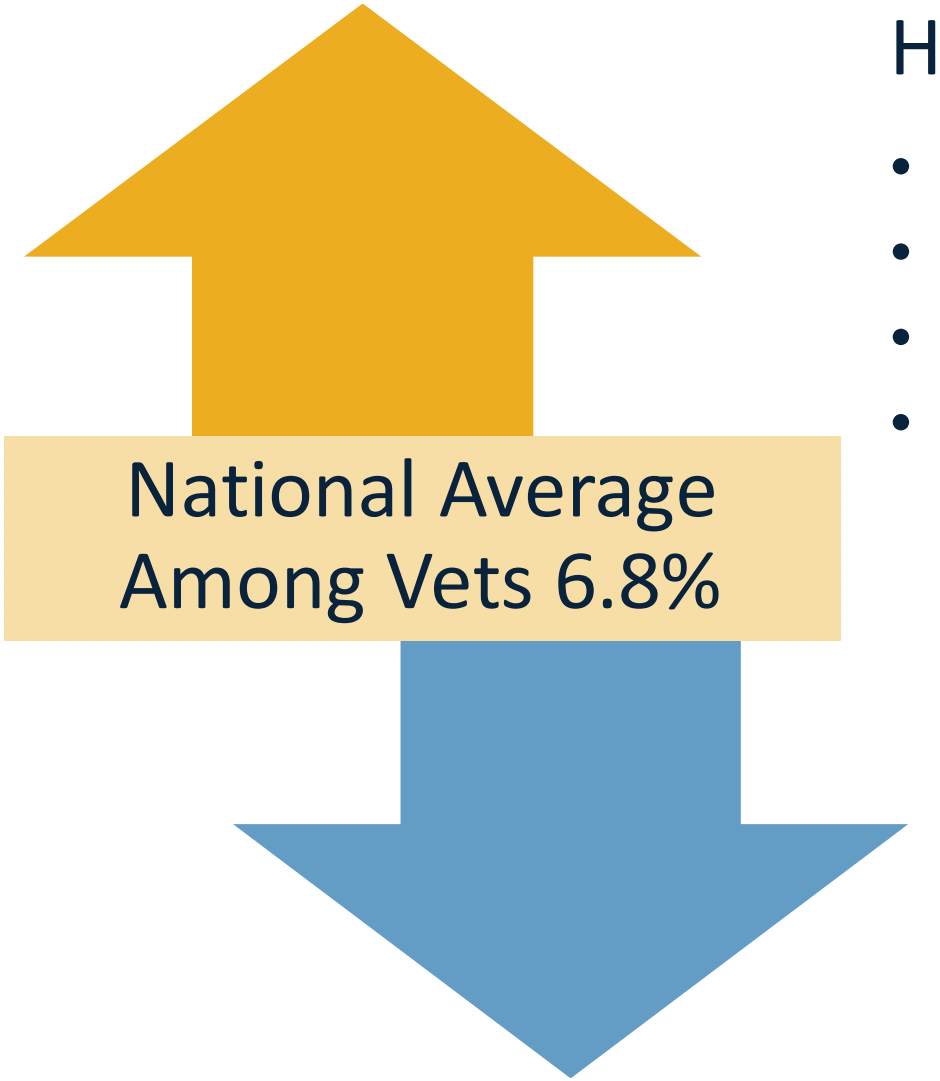
September 2021 VHA enrollees, by age and sex



September 2021 VHA enrollees in Medicaid, by age and sex



Medicaid enrollment among VHA enrollees, by state, Sept 2021



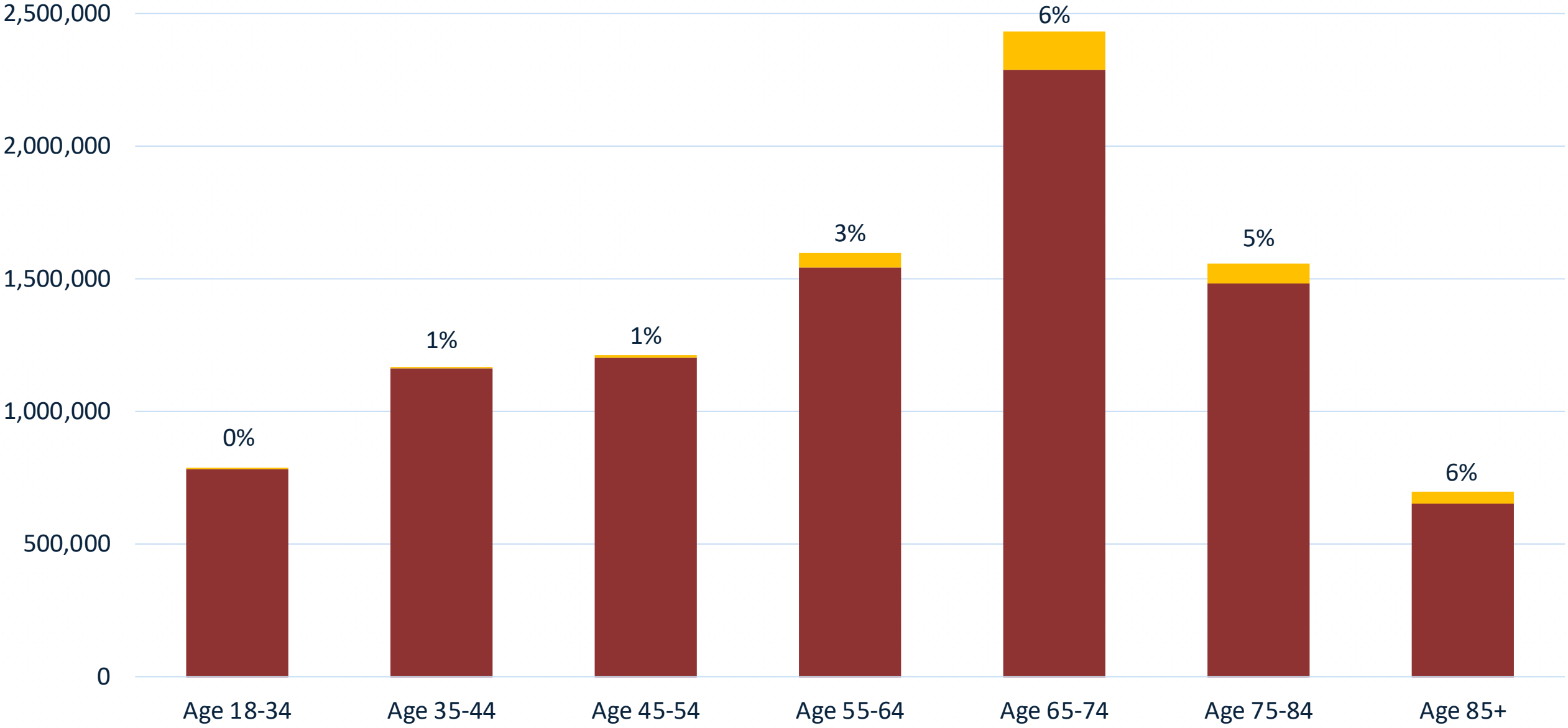
Highest

- 20% District of Columbia
- 15% Connecticut
- 13% Maine
- 11% New Mexico, Louisiana

Lowest

- 4% North Dakota, Missouri, Kansas
- 3% South Dakota, Utah, Texas, Nebraska, Wyoming

September 2021 VHA Enrollees Dual Eligibles, by age



Enrollment Data

Medicare

- One record per person, per calendar year
- 91% enrolled full year (2021)
- Monthly indicators for
  - Reason for eligibility
  - Medicaid (dual eligible)
  - Part A, Part B, Part D
  - Managed care

Medicaid

- One record per person, per state, per calendar year
- 80% enrolled full year (2021)
- Monthly indicators for
  - Reason for eligibility
  - Medicare (dual eligible; full/partial)
  - Waivers
  - Managed care
  - And more

Managed Care

Medicare

- 34% in managed care 1+ month during 2021
  - aka Medicare Advantage

Medicaid

- 73% in managed care 1+ month during 2021
- MC enrollment varies by state & reason for eligibility
- Many types of managed care
- Can be in multiple MC plans for different types of care

Session roadmap

- Medicare & Medicaid Enrollment
- **Medicare & Medicaid Utilization**
- Other CMS Data
- USRDS Data
- Which files should I use?
- Data AAA (Access, Availability, & Assistance)

Source of VA, Medicare, & Medicare Data

VA Data Flow

Veteran obtains care at the VA

→ Provider enters data into EHR

→ Data is stored in VA databases and made available to researchers

CMS Data Flow

Veteran obtains care outside VA, paid by Medicare or Medicaid

→ Provider enters data into EHR

→ **EHR data is not CMS data**

→ SEE NEXT SLIDE

→ CMS data for researchers

Sources of Medicare & Medicaid Data

Patient obtains care in community, paid by Medicare or Medicaid

Provider submits bills (claims) to CMS (Medicare)

Medicare FFS Claims

Provider submits bills (claims) to insurance company

Insurance company provides encounter data to CMS

Medicare Managed Care Encounters

Provider submits bills (claims) to state Medicaid program

Medicaid FFS Claims

State data is standardized nationally

Provider submits bills (claims) to insurance company

Insurance company provides encounter data to state

State data is standardized nationally

Medicaid Managed Care Encounters

Data is stored in CMS databases and made available to researchers

Utilization Data

Medicare

- FFS claims in separate files from managed care encounters
- Claims
  - Inpatient, SNF, Home Health, Outpatient, Carrier, DME, Hospice
- Encounters
  - Inpatient, SNF, Home Health, Outpatient, Carrier, DME
- Part D Events (started in 2006)

Medicaid

- FFS claims in same files as managed care encounters
- Claims + Encounters:
  - Inpatient
  - Long Term Care
  - Prescription Drug
  - Other Services (i.e. everything else)

SNF=Skilled Nursing Facility; DME=Durable Medical Equipment

Medicare Utilization

Strengths

- National enrollment criteria & benefits
- Most timely data (FFS)
- Very large number enrolled
  - Half of Veterans are enrolled
  - Almost everyone 65+
- Captures most care for 65+

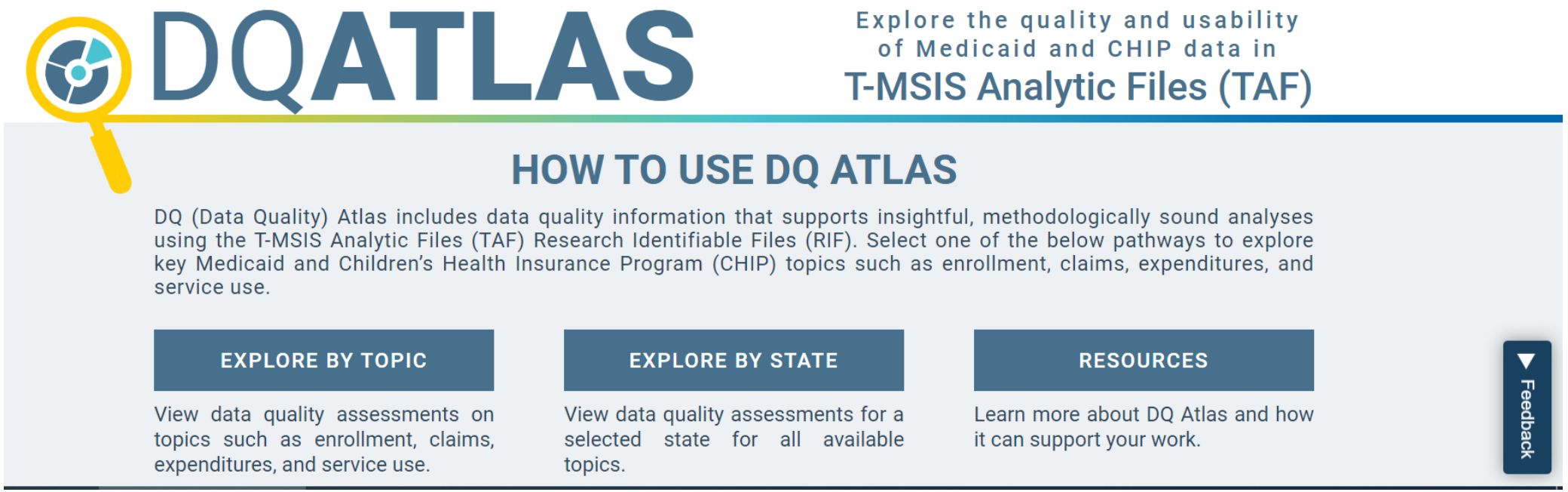
Limitations

- No clinical data

Considerations regarding Medicaid Data

- "Varies by state" - 52 different programs
  - Eligibility
  - Benefits
  - Managed care options/requirements
  - Waivers
- Transition to data new system
  - Between 2013-2015 states transitioned to new system
  - Old data = MAX
  - New data = TAF
  - Structure of the data & variables are different
  - 2014-15 have data in both formats

Medicaid Data Quality



https://www.medicaid.gov/dq-atlas/welcome

RX FILE DQ TOPICS

< National Drug Code - RX >

VIEW AS: Map | Table

DATA YEAR: 2020

DATA VERSION: Preliminary

ALL STATES

DQ Assessments

VIEW BACKGROUND AND METHODS

DATA (CSV) DQ TOPICS SNAPSHOT

CLICK ANY STATE TO SEE FURTHER INFORMATION

ABOUT DQ ASSESSMENTS

Topic: **National Drug Code - RX**

Source data: **TAF**

ASSESSMENT BASIS

Percentage of pharmacy (RX) line records with

NATIONAL SUMMARY FOR THIS TOPIC

DQ Assessment	States with specified DQ Assessment
Low concern	45
Medium concern	6
High concern	2
Unusable	0
Unclassified	0

Feedback

LT FILE DQ TOPICS

< Admission Date - LT >

VIEW AS: Map | Table

DATA YEAR: 2020

DATA VERSION: Preliminary

ALL STATES

DQ Assessments

VIEW BACKGROUND AND METHODS

DATA (CSV) DQ TOPICS SNAPSHOT

CLICK ANY STATE TO SEE FURTHER INFORMATION

ABOUT DQ ASSESSMENTS

Topic: **Admission Date - LT**

Source data: **TAF**

ASSESSMENT BASIS

Percentage of long-term care (LT) records with

NATIONAL SUMMARY FOR THIS TOPIC

DQ Assessment	States with specified DQ Assessment
Low concern	49
Medium concern	0
High concern	2
Unusable	0
Unclassified	2

Feedback

Medicaid Utilization

Strengths

Especially important when studying specific groups

- Disabled, mental illness
- Elderly, institutionalized
- Females <45

Limitations

- No clinical data
- Variation by state (eligibility, benefits, data quality)
- Compared to Medicare
  - Relatively small number of Veterans enrolled
  - Continuous coverage less common
  - Data is more delayed

Resources

About Medicare:
www.cms.gov
(click on Medicare)

For Medicare beneficiaries:
www.Medicare.gov

About Medicaid:
www.Medicaid.gov

For Medicaid beneficiaries:
Varies by state

Session roadmap

- Medicare & Medicaid Enrollment
- Medicare & Medicaid Utilization
- **Other CMS Data**
- USRDS Data
- Which files should I use?
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Ensuring accessible and high-quality healthcare

Plan Quality Measures	• Medicare Advantage HEDIS
Beneficiary Surveys	• Medicare Current Beneficiary Survey (MCBS)
Quality Initiatives	• Patient Assessment Instruments

Medicare Advantage HEDIS

Healthcare Effectiveness Data and Information Set

- Tool used by health plans to measure quality of care
- One record per person, per plan, per calendar year
  - Can be used to summarize amount and types of utilization
- During the year…
  - Received eye exam? Knee replacement?
  - Number of hospitalizations, length of stay
  - Received certain medications

Medicare Advantage HEDIS

Strengths

- More timely than Medicare encounter data when studying utilization for managed care enrollees
- Good for high level/summary information

Limitations

- No dates
- No diagnosis or procedure codes
- No provider information

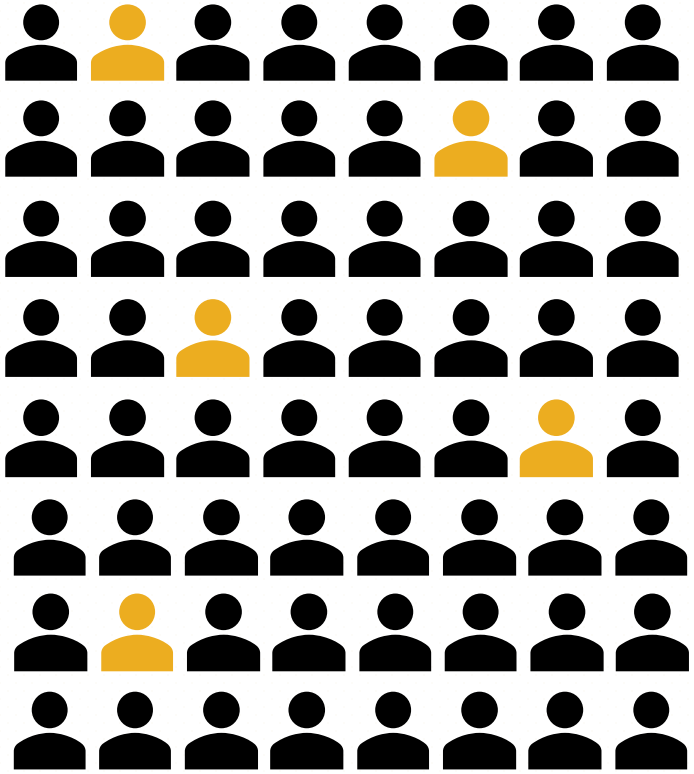
Medicare Current Beneficiary Survey

(MCBS)

- Annual survey since 1991
- In person interviews
- Includes
  - Satisfaction with care and usual source of care
  - Social determinants of health
  - Outcomes
  - Health insurance coverage (beyond Medicare)
  - Total healthcare events and expenditures from all payers

MCBS Sample

- Nationally representative of Medicare enrollees
  - Over-samples subgroups of interest
- Some questionnaires specific to individuals living in a facility
- Rotating panel design
- Beneficiaries participate for 4 years
- N=15.5k in 2020
  - 11% can be matched to VHA cohort



Types of MCBS Data

Survey File

- Demographics, household, insurance, health status & functioning
- Usual source of care, access & satisfaction with care
- Summary of FFS claims
- Similar to “Access to Care” module <=2013

Cost Supplement

- All patient reported healthcare events and amount paid by all payers
- Includes Medicare FFS claims
- Similar to “Cost and Use” module <=2013

MCBS Questions of Interest in VA Research

- Military Service
  - Did you ever serve in the Armed Forces of the United States?
  - Which time period(s) did you serve in the Armed Forces?
  - Were you even an active member of a National Guard or military reserve unit of the United States?
- VHA vs community as source of care
  - Usual source of care
  - Satisfaction with care
  - Access to care

MCBS

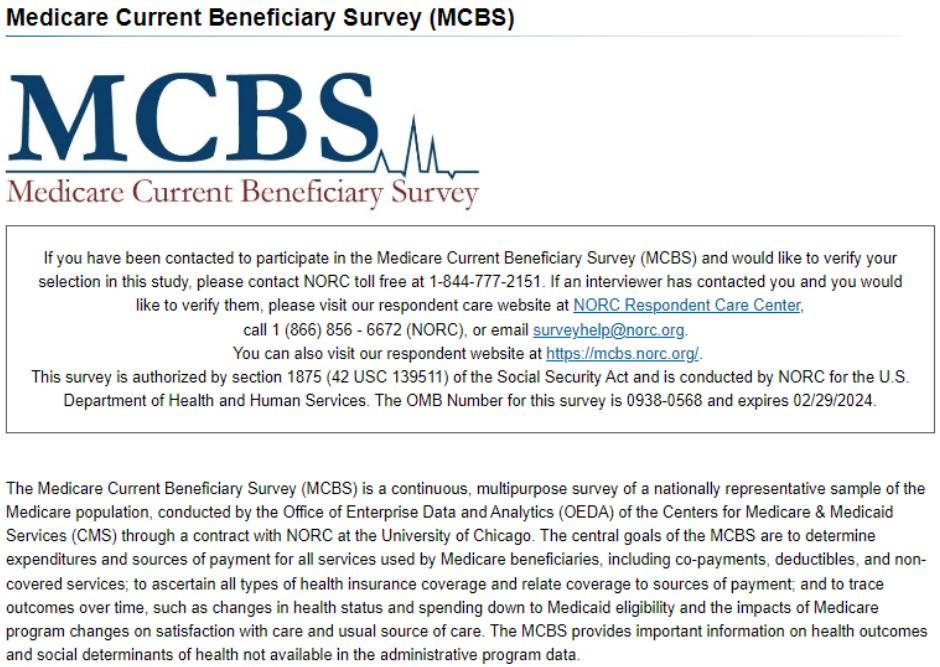
Strengths

- Information that can't be captured elsewhere
- All healthcare captured
- Compare Veterans inside and outside of VHA

Limitations

- Not ideal for Veteran-only studies

Resources



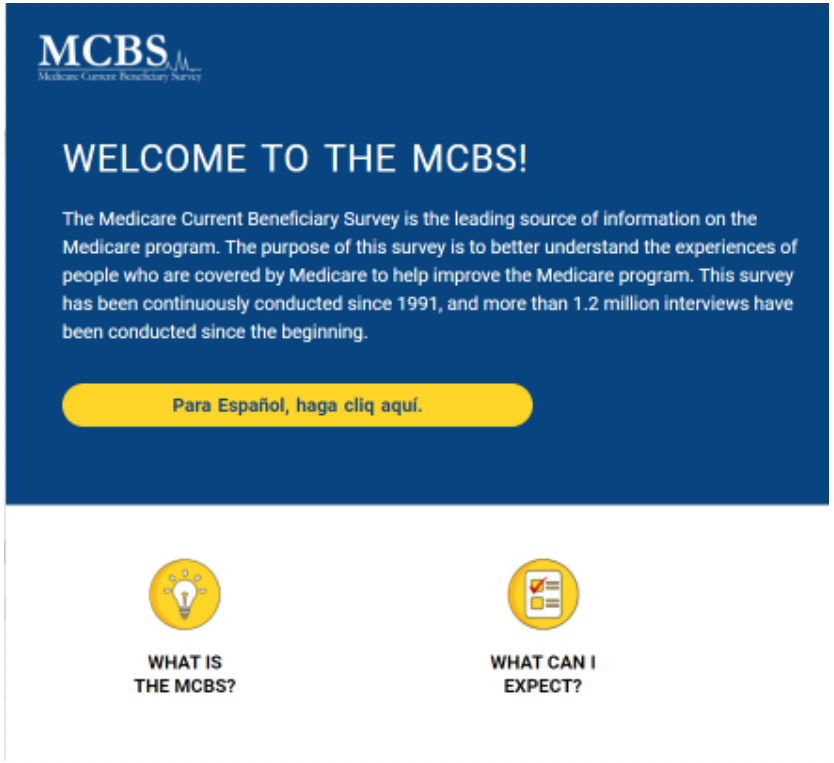
Medicare Current Beneficiary Survey (MCBS)

MCBS
Medicare Current Beneficiary Survey

If you have been contacted to participate in the Medicare Current Beneficiary Survey (MCBS) and would like to verify your selection in this study, please contact NORC toll free at 1-844-777-2151. If an interviewer has contacted you and you would like to verify them, please visit our respondent care website at NORC Respondent Care Center, call 1 (866) 856 - 6672 (NORC), or email surveyhelp@norc.org. You can also visit our respondent website at https://mcbs.norc.org/. This survey is authorized by section 1875 (42 USC 139511) of the Social Security Act and is conducted by NORC for the U.S. Department of Health and Human Services. The OMB Number for this survey is 0938-0568 and expires 02/29/2024.

The Medicare Current Beneficiary Survey (MCBS) is a continuous, multipurpose survey of a nationally representative sample of the Medicare population, conducted by the Office of Enterprise Data and Analytics (OEDA) of the Centers for Medicare & Medicaid Services (CMS) through a contract with NORC at the University of Chicago. The central goals of the MCBS are to determine expenditures and sources of payment for all services used by Medicare beneficiaries, including co-payments, deductibles, and non-covered services; to ascertain all types of health insurance coverage and relate coverage to sources of payment; and to trace outcomes over time, such as changes in health status and spending down to Medicaid eligibility and the impacts of Medicare program changes on satisfaction with care and usual source of care. The MCBS provides important information on health outcomes and social determinants of health not available in the administrative program data.

For researchers
https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/MCBS



For respondents
https://mcbs.norc.org/

Assessment Data

aka Patient Assessment Instruments

- Standardized forms
- Assesses health and functional status of patient
- Information collected at various times
- Purposes
  - Tracking/planning patient care
  - Measuring quality of care at the facility/provider
  - May determine provider payment (dependent on patient's health status and needs)

Types of Questions on Assessment Instruments

- Functional Abilities
  - Activities of Daily Living (ADLs)
  - Mobility
  - Eating & elimination
  - Hearing, Speech, Vision
- Cognitive Patterns, Mood, Behavior
- Health conditions & diagnoses
- Treatments, therapies, planned care

Type of Provider	Assessment Form/File	Which stays/patients?	# Vets in 2021 data
Inpatient Rehab Facility	Inpatient Rehabilitation Facility - Patient Assessment Instrument (IRF-PAI)	All stays paid by Medicare FFS & MA	51k
Home Health Agencies	Outcome and Assessment Information Set (OASIS)	All care paid by Medicare FFS, MA, or Medicaid	505k
Nursing Facilities	Resident Assessment Instrument (RAI)-Minimum Data Set (MDS)	All stays in CMS certified nursing facilities, regardless of payer	361k

Which facilities are included in MDS data?

Assessment Data

Strengths

- Functional status
- All nursing facility stays, regardless of payer

Limitations

- Details not needed by all projects

CMS.gov Centers for Medicare & Medicaid Services

About CMS Newsroom Data & Research

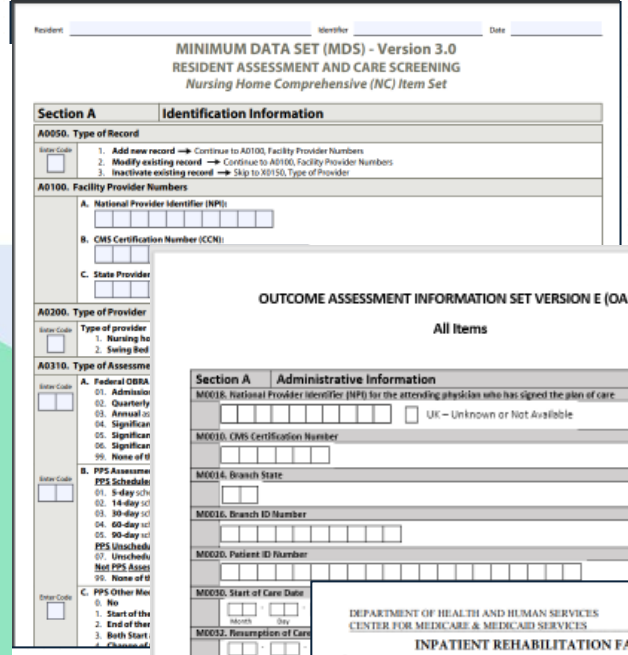
Medicare Medicaid/CHIP Marketplace & Private Insurance Priorities Training & Education

Medicare menu

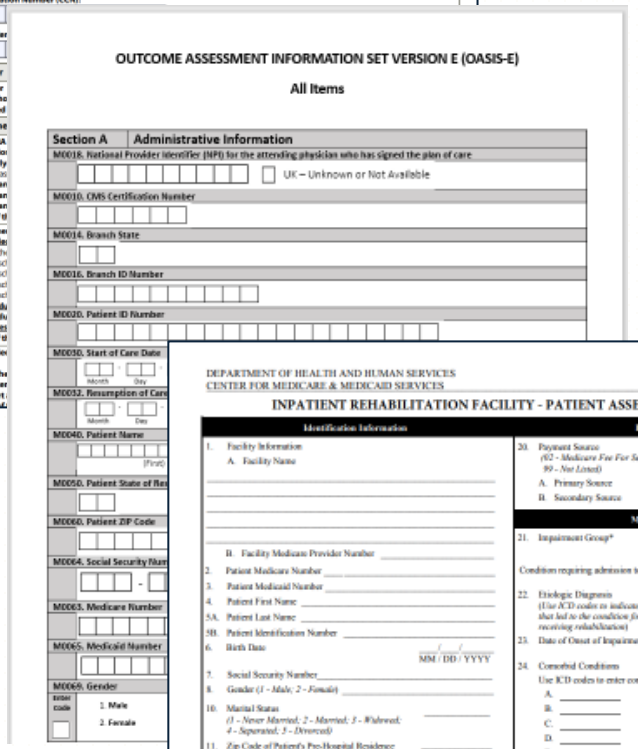
- Enrollment & renewal
- Coverage
- Regulations & guidance
- Coding & billing
- Payment
- Medicare-Medicaid coordination
- Appeals & grievances
- Quality
- Health & safety standards
- Employers & plan sponsors
- Innovation Center

Quality pages

- Value-based programs
- Person & Family Engagement
- Quality improvement organizations
- Nursing home quality improvement
- Inpatient Rehabilitation Facility (IRF) Quality Reporting Program (QRP)
- Home Health Quality Reporting Program
- ESRD Quality Incentive Program
- CMS National Quality Strategy
- Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP)
- Appropriate Use Criteria Program
- Quality measures
- Clinical Laboratory Improvement Amendments (CLIA)
- Medicare Advantage quality improvement program
- Physician compare initiative
- Quality initiatives
- Part C and D Performance Data

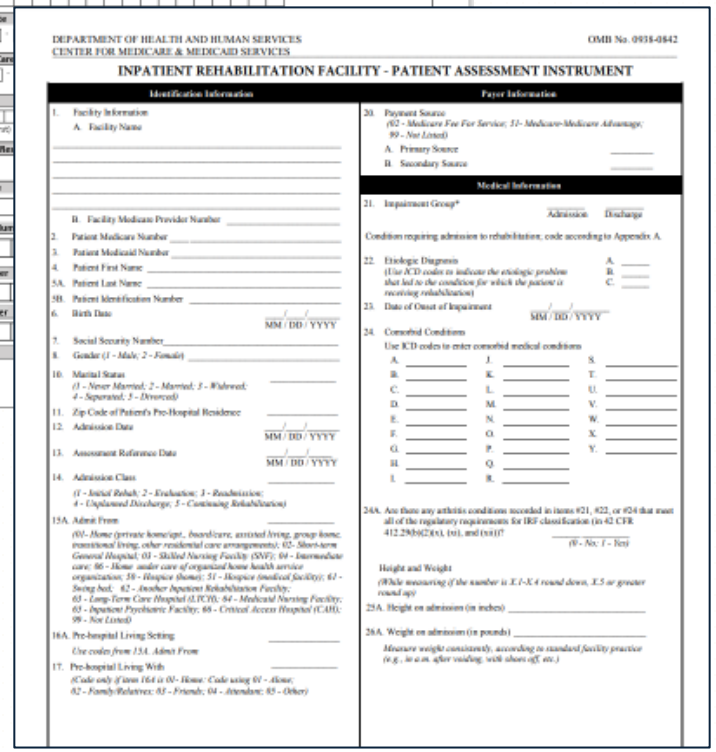

MINIMUM DATA SET (MDS) - Version 3.0
RESIDENT ASSESSMENT AND CARE SCREENING
Nursing Home Comprehensive (NC) Item Set

Section A Identification Information


OUTCOME ASSESSMENT INFORMATION SET VERSION E (OASIS-E)

All Items

Section A Administrative Information


DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTER FOR MEDICARE & MEDICAID SERVICES

OMB No. 0938-0842

INPATIENT REHABILITATION FACILITY - PATIENT ASSESSMENT INSTRUMENT

Identification Information | Payer Information

Resources

Public Use Files

Available on SAS Grid
libname CMS_PBLC

- Providers of Services file
  - Facilities/Institutional providers
- UPIN (until 2007)
  - Individuals
- National Provider Identifier (NPI)

vaww.virec.research.va.gov/VACMS/Provider/Data.htm

Downloadable from CMS

- data.cms.gov
- Medicare Part D Prescription Drug Plan Formulary, Pharmacy Network, and Pricing Information Files
  - https://www.cms.gov/Research-Statistics-Data-and-Systems/Files-for-Order/NonIdentifiableDataFiles/PrescriptionDrugPlanFormularyPharmacyNetworkandPricingInformationFiles

Session roadmap

- Medicare & Medicaid Enrollment
- Medicare & Medicaid Utilization
- Other CMS Data
- **USRDS Data**
- Which files should I use?
- Data AAA (Access, Availability, & Assistance)

Dept of Health and Human Services

National Institute of Health (NIH)

National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)

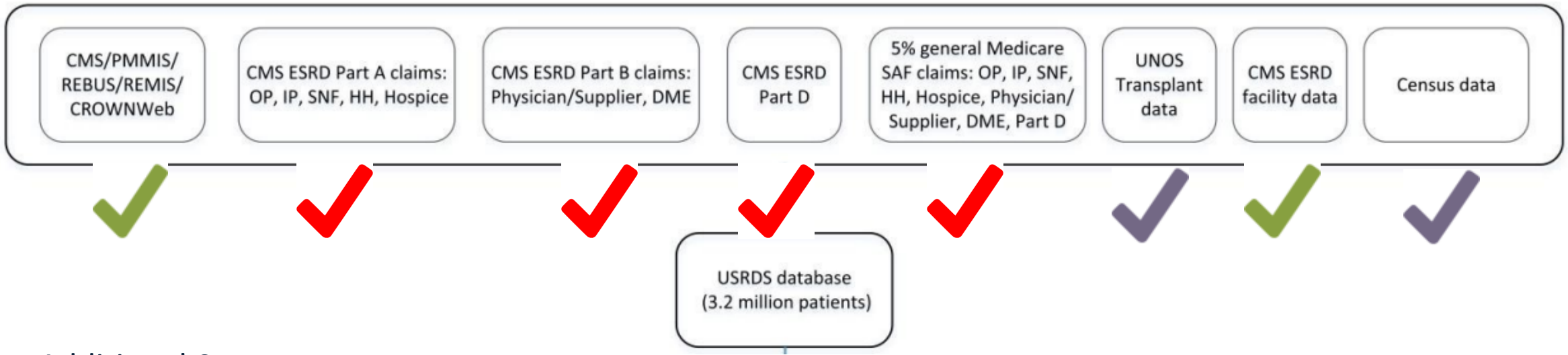
US Renal Data System (USRDS)

Goals of USRDS

- Define and describe the population with End Stage Renal Disease (ESRD)
- Study treatments, outcomes, costs of ESRD
- Support investigator-initiated research

Why are CMS data and USRDS often talked about together?

Figure 1. Structure of the USRDS database



Additional Sources

CMS 2728: Medical Evidence Report

CMS 2746: ESRD Death Notification

USRDS Special Studies

Source: 2022 Researcher's Guide to the USRDS Database; https://www.niddk.nih.gov/-/media/Files/USRDS/For-Researchers/Researchers-Guide/2022/USRDS_Researcher_Guide_2022.pdf

Who is included in the USRDS Database?

- All ESRD patients, not just Medicare enrollees
  - Medical Evidence Report (CMS Form 2728) was completed by a physician
  - Chronic dialysis
  - Kidney transplant
- Does not include patients with acute kidney failure

- Cumulative since mid 1960s
- 3.2 million patients (all years)
- 100k-150k added each year
  - 10% in VHA cohort

USRDS Curated Files

Core Files

- Most commonly used; needed to use other files
- Patient
- Medical Evidence
- Treatment history
- Payer history
- Transplant & waitlist

Transplant Files

- Detailed transplant data from CMS and United Network for Organ Sharing (UNOS)
- Donor information
- Transplant Follow-up

Hospital Files

- Medicare FFS Inpatient claims
- Doesn't include costs

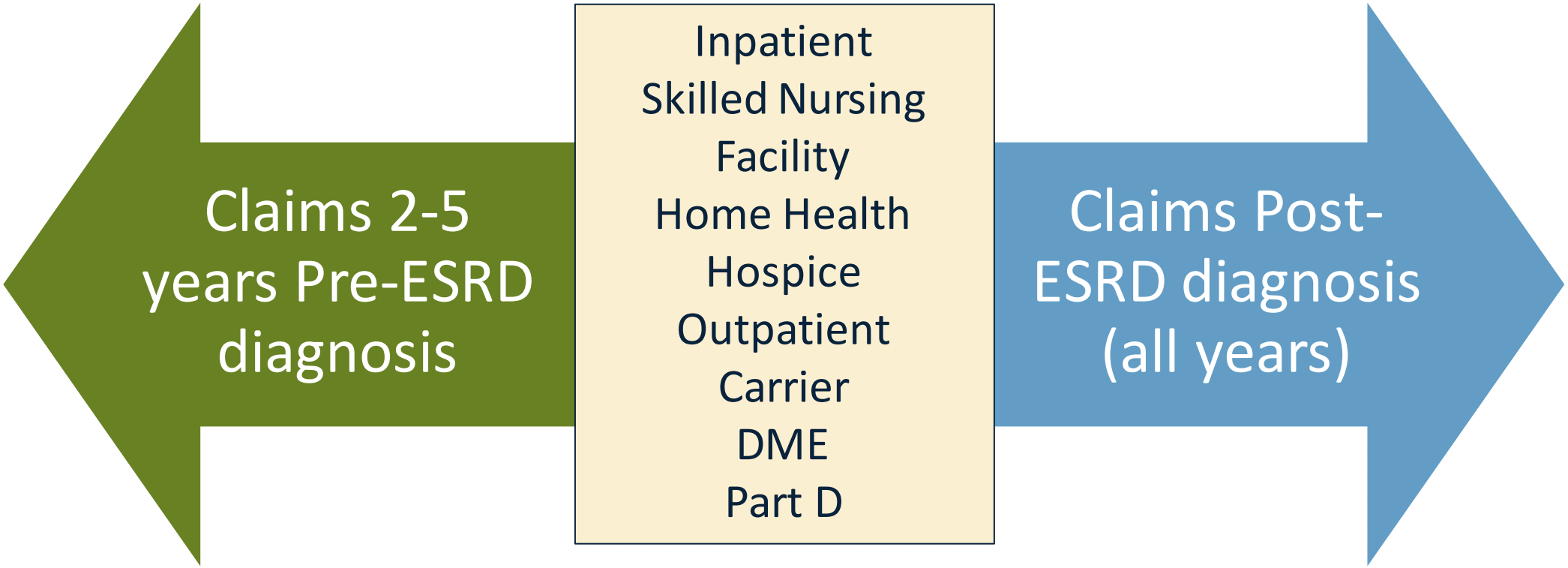
USRDS Special Studies

- Clinical Performance Measures (CPM) Survey
- Comprehensive Dialysis Survey (CDS)

CROWNWeb Clinical

- Consolidated Renal Operations in a Web Enabled Network
- Clinical data collected from Medicare-certified dialysis facilities

Medicare Claims from USRDS



USRDS Data

Strengths

- Clinical info for patients treated outside VHA (including Medicare)
- Easy to find Medicare paid treatments
- ESRD treatments paid by private insurance

Limitations

- Only contains complete healthcare data for Medicare FFS enrollees
- Some data overlaps with Medicare data from CMS

Resources

www.usrds.org (old)

www.niddk.nih.gov/about-niddk/strategic-plans-reports/usrds (new)

Session roadmap

- Medicare & Medicaid Enrollment
- Medicare & Medicaid Utilization
- Other CMS Data
- USRDS Data
- **Which files should I use?**
- Data AAA (Access, Availability & Assistance)

Which files should I use?

Nursing Facilities

- CMS MDS
- Medicare SNF
- Medicaid LTC

Prescription drugs

- Medicare Part D
- Medicaid RX

Patients with ESRD

- USRDS
- Medicare

Considerations when studying care in **nursing facilities**

CMS MDS

- All payers
- Will be overlap with other data sources
  - State veteran homes (overlap with VA MDS)
  - Medicare & Medicaid

Medicare SNF

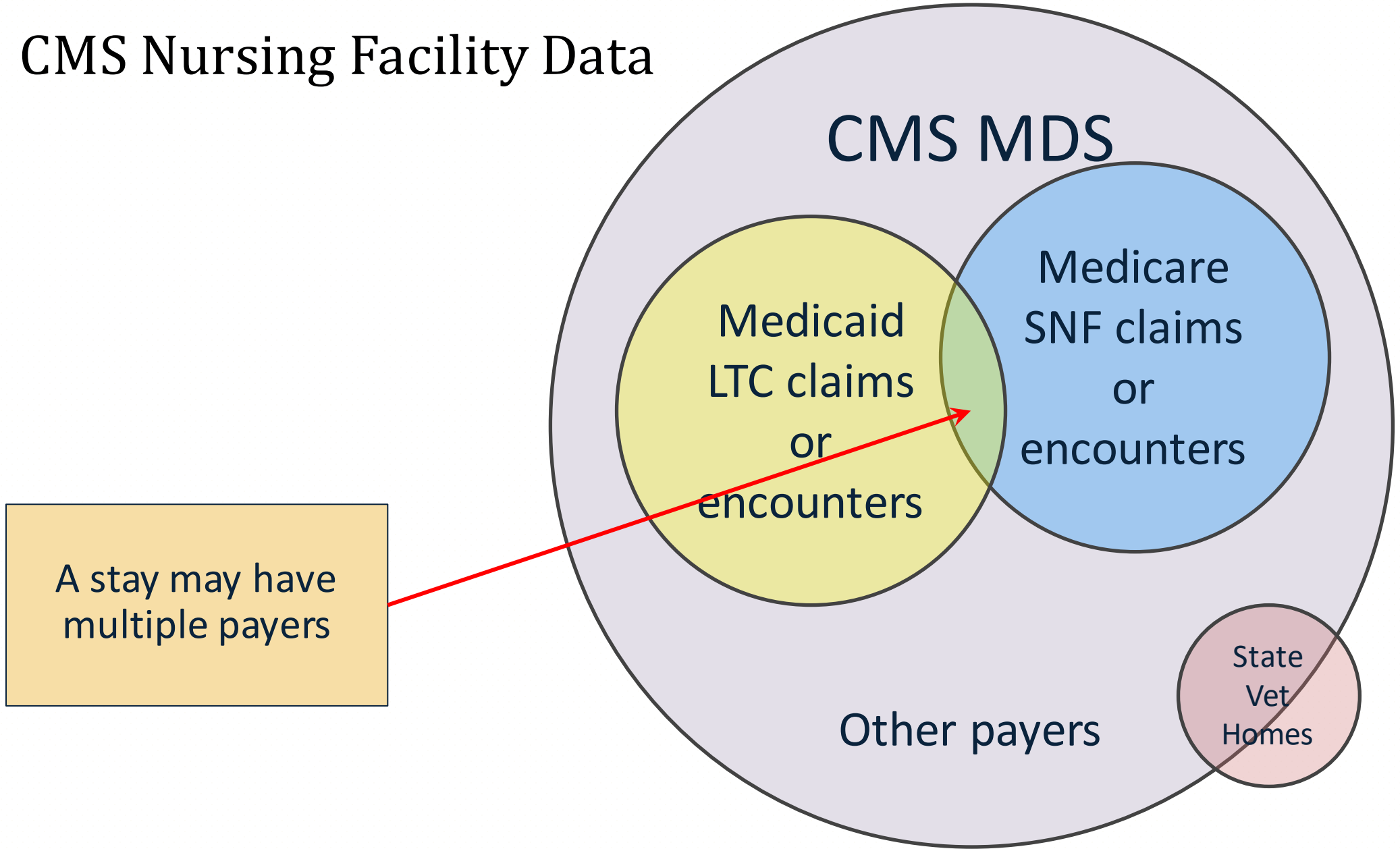
- Medicare doesn't cover all stays in nursing facilities
  - Skilled Nursing only
  - No custodial care
  - Max 100 days
  - Requires qualifying hospitalization

Medicaid LTC

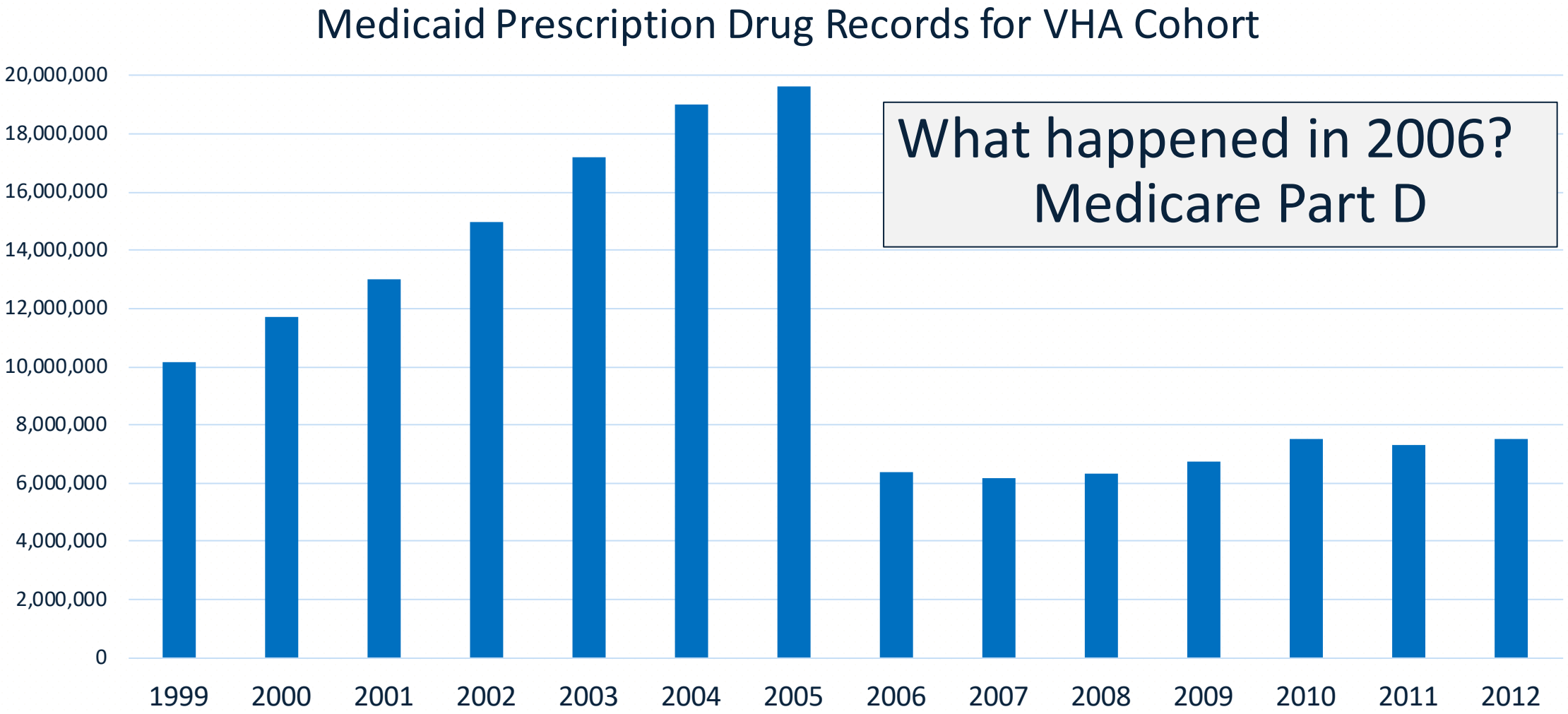
- Only low-income patients

Portions of a stay may be paid first by Medicare, then Medicaid

CMS Nursing Facility Data



CMS Prescription Drug Data



Considerations when studying **prescription drugs**

Dual Eligibles

- Medicaid <2006
- Medicare 2006-forward

VHA-Medicare Enrollees

- Only half of Medicare enrolled Veterans have Part D coverage

Prescriber

- Drugs prescribed by VA physician are filled in VA
- Drugs prescribed by non-VA physician are filled outside VA

Considerations when studying **patients with ESRD**

USRDS specific files (e.g. Core)

- Gold standard for ESRD diagnosis
- Only source of detailed & clinical data

Medicare claims from USRDS

- Limited data prior to ESRD diagnosis
- Delayed 2+ years behind Medicare data from CMS

Medicare claims from CMS

- Availability not tied to ESRD diagnosis
- Timely

Not recommended to use Medicare claims from both sources

Session roadmap

- Medicare & Medicaid Enrollment
- Medicare & Medicaid Utilization
- Other CMS Data
- USRDS Data
- Which files should I use? (Examples)
- **Data AAA (Access, Availability, & Assistance)**

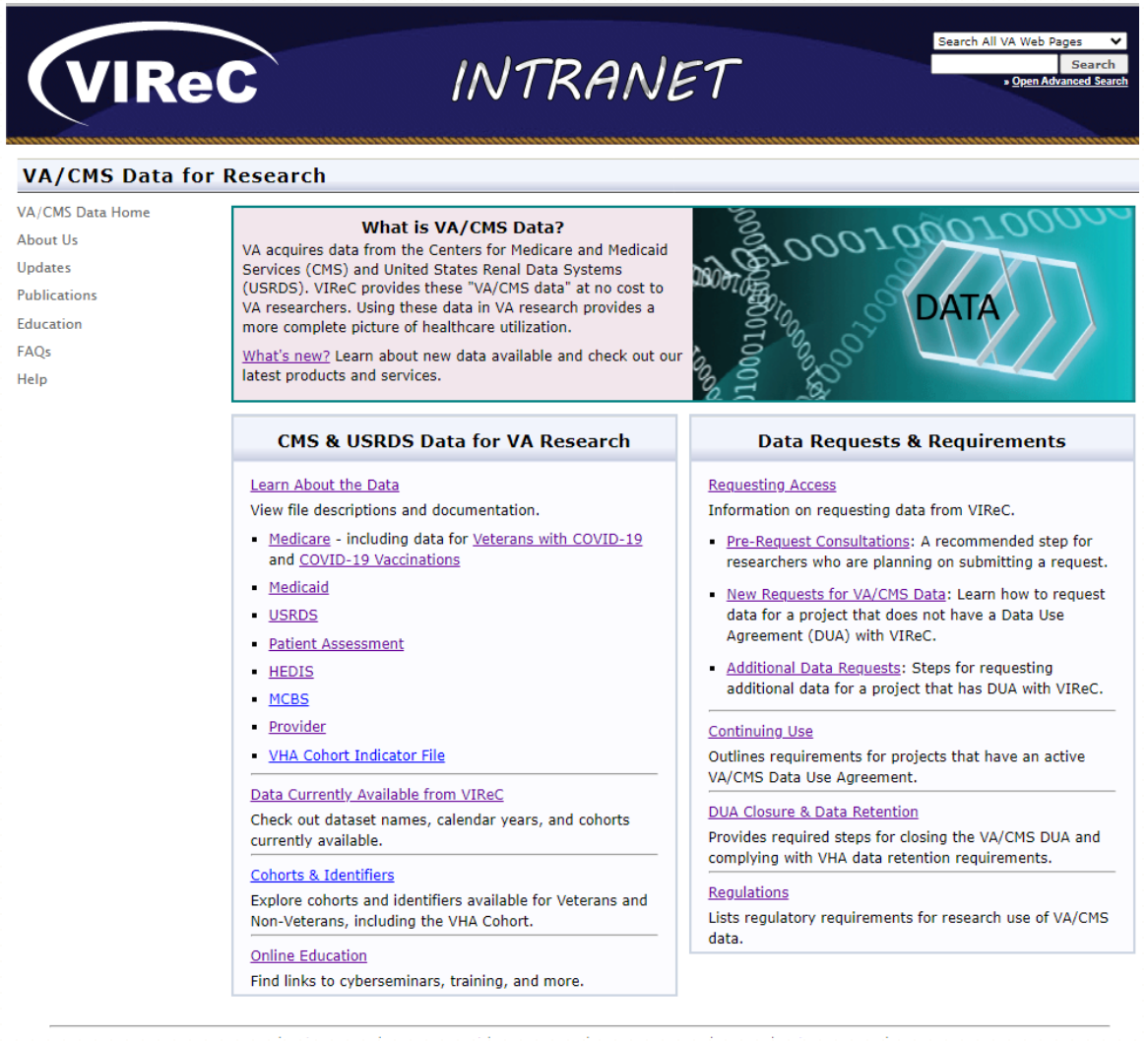
Data Access

VIReC VA/CMS DATA FOR RESEARCH

- The data steward for CMS and USRDS data used for VA research
- Distributing data from to VA approved projects since 2003
- Providing assistance to VA research projects using CMS data
- No cost to VA researchers

Requesting CMS data

- Pre-Request Consultation
- Request Process and Forms
- Data Descriptions and Documentation



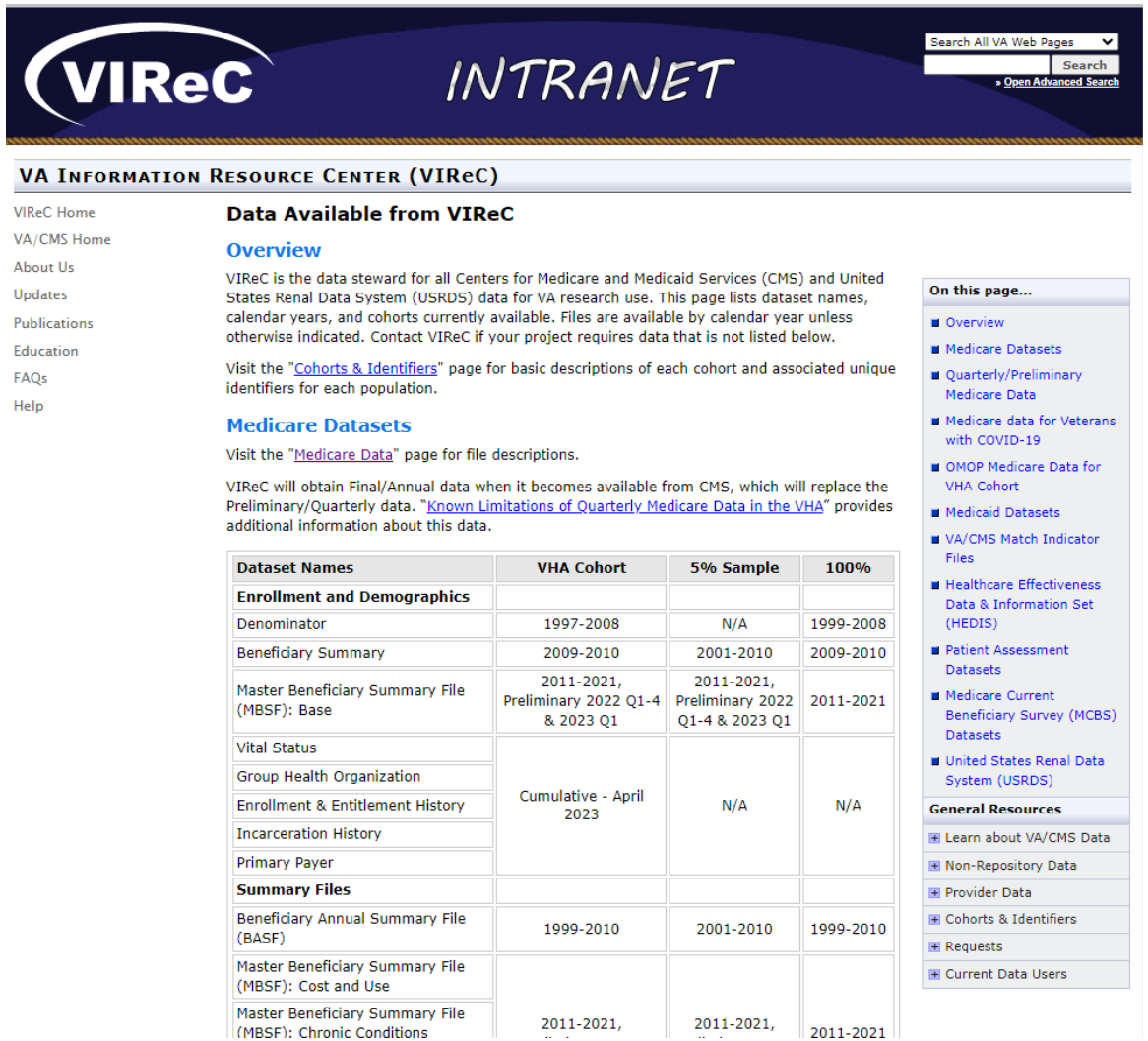
virec.vacmsdata@va.gov

vaww.virec.research.va.gov/Index-VACMS.htm
(VA intranet only)

- Field office of VHA's Chief Strategy Office
- Data steward for CMS and USRDS data used for VHA operations
  - VHA Program Offices
  - Quality Improvement/Quality Assurance
- vaww.va.gov/medicareanalysis/ (VA intranet only)

Data Availability in VHA

Current Availability



VIReC INTRANET

Search All VA Web Pages | Search | » Open Advanced Search

VA Information Resource Center (VIReC)

VIReC Home
VA/CMS Home
About Us
Updates
Publications
Education
FAQs
Help

Data Available from VIReC

Overview

VIReC is the data steward for all Centers for Medicare and Medicaid Services (CMS) and United States Renal Data System (USRDS) data for VA research use. This page lists dataset names, calendar years, and cohorts currently available. Files are available by calendar year unless otherwise indicated. Contact VIReC if your project requires data that is not listed below.

Visit the "Cohorts & Identifiers" page for basic descriptions of each cohort and associated unique identifiers for each population.

Medicare Datasets

Visit the "Medicare Data" page for file descriptions.

VIReC will obtain Final/Annual data when it becomes available from CMS, which will replace the Preliminary/Quarterly data. "Known Limitations of Quarterly Medicare Data in the VHA" provides additional information about this data.

Dataset Names	VHA Cohort	5% Sample	100%
Enrollment and Demographics			
Denominator	1997-2008	N/A	1999-2008
Beneficiary Summary	2009-2010	2001-2010	2009-2010
Master Beneficiary Summary File (MBSF): Base	2011-2021, Preliminary 2022 Q1-4 & 2023 Q1	2011-2021, Preliminary 2022 Q1-4 & 2023 Q1	2011-2021
Vital Status	Cumulative - April 2023	N/A	N/A
Group Health Organization			
Enrollment & Entitlement History			
Incarceration History			
Primary Payer			
Summary Files			
Beneficiary Annual Summary File (BASF)	1999-2010	2001-2010	1999-2010
Master Beneficiary Summary File (MBSF): Cost and Use	2011-2021,	2011-2021,	2011-2021
Master Beneficiary Summary File (MBSF): Chronic Conditions			

On this page...

- Overview
- Medicare Datasets
- Quarterly/Preliminary Medicare Data
- Medicare data for Veterans with COVID-19
- OMOP Medicare Data for VHA Cohort
- Medicaid Datasets
- VA/CMS Match Indicator Files
- Healthcare Effectiveness Data & Information Set (HEDIS)
- Patient Assessment Datasets
- Medicare Current Beneficiary Survey (MCBS) Datasets
- United States Renal Data System (USRDS)

General Resources

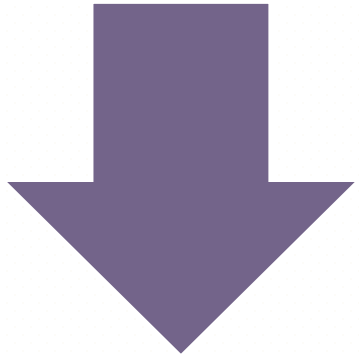
- Learn about VA/CMS Data
- Non-Repository Data
- Provider Data
- Cohorts & Identifiers
- Requests
- Current Data Users

- Types of data
- Files
- Cohorts
- Years

https://vaww.virec.research.va.gov/VACMS/Intro/Data-Available.htm (VA intranet only)

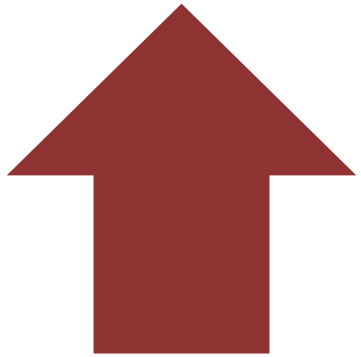
Availability

- Preliminary vs “Final” versions of data
- Most timely data is not the most complete/final



Timeliness

Complete & Final



Approximate Lags in Data Availability

2+ year delay

- Medicaid (final)
- MA encounters (final)
- USRDS
- MCBS

1-2 year delay

- Medicaid (preliminary)
- MA encounters (preliminary)
- Medicare enrollment & FFS claims (final)
- Assessment data (final)
- HEDIS

<1 year delay

- Medicare enrollment & FFS claims (preliminary)
- Assessment data (preliminary)

Cohorts

VHA cohort

- Most files available
- Scrambled SSN

5% sample

- Medicare data only
- Based on last 2 digits of SSN

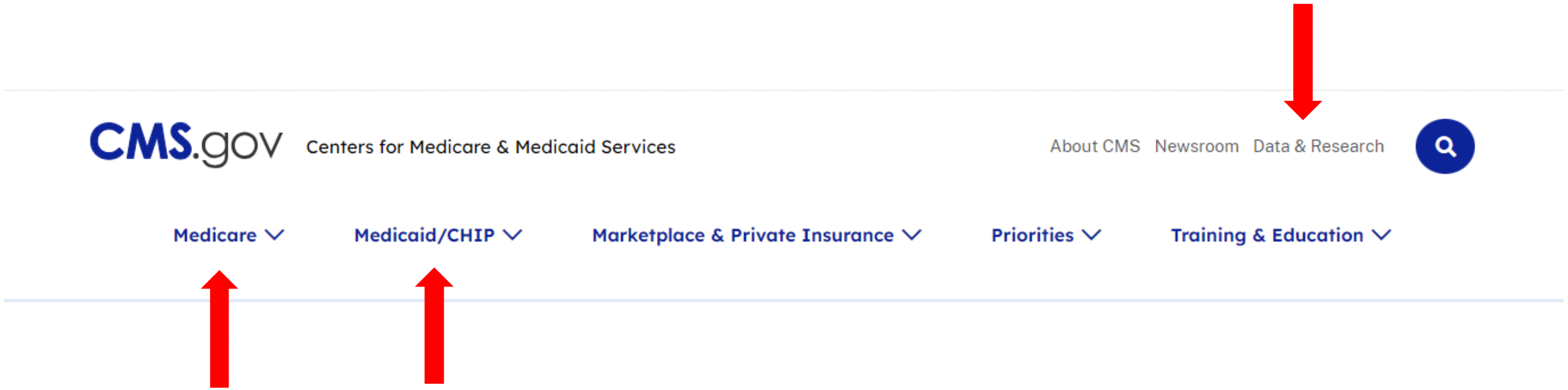
100%

- All people for whom data are available
- Enrollment, summary, and other small files (MCBS, USRDS, Assessment)

- Non-SSN based identifier
  - Differs by dataset
- Members of VHA cohort can be identified
- Years available may differ than what is available for VHA cohort

Assistance

To understand the data, you must understand the source



ResDAC
RESEARCH DATA ASSISTANCE CENTER

- CMS contractor based at the University of Minnesota
- Provides free assistance and training to researchers using CMS data
  - Help desk
  - Knowledge base
  - Webinars
- www.resdac.org

- Source of most CMS data that VA receives
- Documentation
  - Data dictionaries
  - Summary tables
  - User guides & technical guides
  - White papers & presentations
- www.ccwdata.org

CMS Data Cyberseminar Mini-Series

- *Using Medicare Data in VA research: Part 1* April 2023
- *Using Medicare Data in VA research: Part 2* July 2023
- *Using Medicare Data to Study COVID-19 in Veterans* October 2022
- *Medicare data in the OMOP Common Data Model* January 2023
- *Using Medicaid Data in VA Research* July 2022 (will be updated January 2024)

https://www.hsrd.research.va.gov/cyberseminars/

Questions about Using VA Data?

HSRData Listserv

- Community knowledge sharing
- ~1,600 VA data users
- Researchers, operations, data stewards, managers
- Subscribe by visiting https://vaww.virec.research.va.gov/Support/HSRData-L.htm (VA Intranet)

VIReC HelpDesk

- Individualized support
- Request Form: varedcap.rcp.vaec.va.gov/redcap/surveys/?s=KXMEN77LXK (VA Intranet)

THANK YOU!

Questions?

CONTACT INFORMATION

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Project Director
VA/CMS Data for Research Project

kristin.degroot@va.gov

CMS DATA CYBERSEMINAR MINISERIES

Next session:

January 9, 2023 @ 3pm EST

Using Medicaid Data in VA Research

CMS DATA

BONUS SLIDES

Resources for *VA Data Users*

Quick Guide: Resources for Using VA Data	https://vaww.virec.research.va.gov/Toolkit/QG-Resources-for-Using-VA-Data.pdf (VA Intranet)
VA Information Resource Center (VIReC)	https://vaww.virec.research.va.gov/Index.htm (VA Intranet)
VIReC Cyberseminars	https://www.virec.research.va.gov/Resources/Cyberseminars.asp
VHA Data Portal	https://vaww.vhadataportal.med.va.gov/Home.aspx (VA Intranet)
VA Informatics and Computing Infrastructure (VINCI)	https://vaww.vinci.med.va.gov/vincicentral/ (VA Intranet)
Health Economics Resource Center (HERC)	https://vaww.herc.research.va.gov (VA Intranet)
Corporate Data Warehouse (CDW)	https://vaww.cdw.va.gov/Pages/CDWHome.aspx (VA Intranet)

Electronic Health Record Modernization *Resources for VA Data Users*

"EHRM & Research" page on the Research Resource Guide SharePoint

https://dvagov.sharepoint.com/sites/VHAPugResearch/RRG/Pages/EHRM-Research.aspx

"EHRM and Implications for Data Users" page on the VIReC website

https://vaww.virec.research.va.gov/EHRM/Overview-and-Implications.htm

Data Management and Migration Knowledgebase" on the Data Migration, Management, and Syndication SharePoint

https://vaww.cdw.va.gov/sites/EHRMDataIntegration/DIRAKnowledgeShare/Pages/DIRAKnowledgeShareHome.aspx

***Syndicated Data Bits* - Weekly Webinars**

https://tinyurl.com/y3wgxzu5

Office of Electronic Health Record Modernization (OEHRM) Intranet site

https://vaww.ehrm.va.gov/