

**HEDIS[®] 2016 PCR Patient-Level Data
File Specifications
File 2 of 2 Files
(2015 Measurement Year)**

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Table of Contents

1	INTRODUCTION	4
1.1	Purpose	4
1.2	Scope	4
1.3	Technical Support.....	4
1.4	References	4
1.5	Document Structure	4
2	IMPORTANT TECHNICAL ELEMENTS REGARDING HEDIS 2016 PATIENT-LEVEL SUBMISSIONS	5
2.1	Patient-Level and Summary-Level Data Must Match	5
2.2	Inclusion of Contract Number	5
2.3	Inclusion of Health Insurance Claim (HIC) Number.....	5
2.4	File Validation Rules.....	5
2.5	Common Submission Errors	6

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1 Introduction

1.1 Purpose

This document describes the file layout, for File 2 of 2 files, that supports the Centers for Medicare & Medicaid Services (CMS) annual collection of Healthcare Effectiveness Data and Information Set (HEDIS®)¹ patient-level quality of care measures received from Medicare Advantage Organizations (MAOs).

1.2 Scope

This document describes the data file layout for File 2 of 2 files submitted for HEDIS 2016 patient-level data for the measurement year 2015. The document includes specifications for the “header” record and “detail” records. **NOTE: This file includes information for the HEDIS measure “Plan All-Cause Readmissions (PCR)” only, and is required to be submitted by all MA organizations that submit the HEDIS MA summary data. 1876 Cost contracts that voluntarily submit PCR data in their HEDIS MA summary are also required to complete file 2.**

Contracts that fail to submit an error free File 2 by the submission deadline will receive 1 star in the 2017 Star Ratings Plan All Cause Readmissions (PCR) measure.

1.3 Technical Support

For technical support regarding this document, contact Team Edaptive by phone at 1-877-996-1333 or by email at ma_patient_data@edaptivesys.com.

1.4 References

- HEDIS® 2016 Patient-Level Submission Instructions
- HEDIS® 2016 Volume 2: Technical Specifications for Health Plans
- CMS Data Usage Agreement

1.5 Document Structure

Excluding this introductory section, the remainder of this document provides a column-by-column description of the Header Record and Detail Record layouts, including the valid ranges or values allowed for each column.

NOTE: This file differs from File 1 of the HEDIS 2016 files in that File 1 is rolled up to the member level whereas File 2 has a separate record for each discharge.

¹ HEDIS® is a registered trademark of the National Committee for Quality Assurance

2 Important Technical Elements Regarding HEDIS 2016 Patient-Level Submissions

2.1 Patient-Level and Summary-Level Data Must Match

The patient-level data must match the summary-level data for this measure. The patient-level file measures should be calculated following the same measure specifications as the summary-level data. To ensure an exact match, make a copy or “freeze” the database when the measures are calculated.

2.2 Inclusion of Contract Number

There should be no embedded spaces or other characters between the “H” or “R” and the four digits of the contract number.

2.3 Inclusion of Health Insurance Claim (HIC) Number

Include the Health Insurance Claim (HIC) number for every contract member enrolled at any point during the measurement year (2015). The HIC number is the number assigned by CMS to the member upon applying for Medicare services. For most members, the HIC number consists of a nine-digit Social Security number followed by one or two alphanumeric characters (e.g., 111223333A, 123456789C1). Only members entitled to Medicare under the Railroad Retirement Board will have a different HIC number format. Typically, the format for these members **starts** with one or two alpha characters (e.g., WA123456). The HIC number must be a continuous string, with no hyphens or embedded spaces. The HIC number allows CMS to match HEDIS data to other patient-level data for special projects of national interest and research. Because this is the key field for linking members to other CMS databases, it is critical that the HIC number be present and in the proper format, without spaces or other random characters. Although the nine digits in the HIC number are often the same as a member’s Social Security number, this may not always be the case, so it is important **NOT** to substitute a member’s Social Security number for the HIC number.

2.4 File Validation Rules

Each record in the data set will be validated against the following validation rules:

- Each row will be validated to ensure that it is exactly 173 characters long.
- Numeric values (e.g., member months, denominators, and numerators) must be right-justified and **blank filled to the left of the value**.

Text fields (e.g., “Organization Name” in the header record and “HIC Number” in the detail records) must be left-justified and **blank filled to the right of the value**.

2.5 Common Submission Errors

Error	Explanation
Contract numbers in file name and header do not match for file name Invalid contract number in header for file name	<p><i>The contract number of the file name does not match the header line inside the file.</i></p> <p>Please name the file according to the following CMS policies and procedures:</p> <p>Note: file name variables are shown in <i>lowercase italic letters</i>, all other file name components should be coded exactly as shown.</p> <p>Gentran File Name: <i>guid</i>.NONE.HEDIS.Y.ccccc.PCR. DYYMMDD.THHMMSST.s</p> <p>Actual Submission Name: Example:UHCDDMV.NONE.HEDIS.Y.Hxxxx.PCR. DYYMMDD.THHMMSST.P</p> <p>Test Submission Name: Example:UHCDDMV.NONE.HEDIS.Y.Hxxxx.PCR. DYYMMDD.THHMMSST.T</p> <p>MFT Internet Server: <i>guid</i>.NONE.HEDIS.Y.ccccc.PCR. DYYMMDD.THHMMSST.s</p> <p>Actual Submission Name: Example:AAAAAAA.NONE.HEDIS.Y.Hxxxx.PCR. DYYMMDD.THHMMSST.P NOTE: “AAAAAAA” = System ID</p> <p>Test Submission Name Example: AAAAAAA.NONE.HEDIS.Y.Hxxxx.PCR. DYYMMDD.THHMMSST.T NOTE: “AAAAAAA” = System ID</p> <p>Connect:Direct File Name:s#EFT.ON.HEDIS.ccccc.PCR.DYYMMDD.THHMMSST</p> <p>Actual Submission Name: Example:P#EFT.ON.HEDIS.Hxxxx.PCR.DYYMMDD.THHMMSST</p> <p>Test Submission Name</p>

Error	Explanation
	Example:T#EFT.ON.HEDIS.Hxxxx.PCR.DYYMMDD.THHMMSS T
<p>[NAME OF MEASURE]</p> <p>Column [XXX-XXX]</p> <p>[NAME OF MEASURE]</p> <p>Row [XXX] has [1] column(s) with errors</p> <p>Column [X]</p> <p>[NAME OF MEASURE]</p>	<p><i>There are incorrect characters, or incorrect number of characters, or data for that measure is missing.</i></p> <p>Each measure in the HEDIS 2016 Patient Level Data File Specifications, File 2 of 2 files document is explained in the <i>Detail Record</i> section and lists the accepted values for that measure. This error could occur when the value submitted does not fit the criteria. For example, if the allowed values are '0,' '1,' but the value submitted is '7,' that would be counted as an error. Numeric values (e.g., ages, weights) must be right-justified and blank filled to the left of the value. For example, '0' not '0.' This error could also occur if there are no characters in the submitted field when at least one character is required.</p>
Row data does not contain correct number of bytes.	<p><i>One or more rows exceed or is shorter than the total characters required for that row.</i></p> <p>The HEDIS 2016 Patient Level Data File Specifications, File 2 of 2 Files document details the number of characters for each row. If the number of characters exceeds the accepted limit, the file will not be accepted.</p>
Admission Date should be less than Discharge Date	Exclude hospital stays where the Index Admission Date is the same as the Index Discharge Date.