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Medicare Beneficiary Database Suite of Systems (MBDSS)  
**Interface Control Document (ICD)**  
**Territory Beneficiary Query (TBQ)**

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## APPROVALS

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**REVISION HISTORY**

| <b>Version</b> | <b>Date</b> | <b>Organization/<br/>Point of Contact</b> | <b>Description of Changes</b>  |
|----------------|-------------|---|--|
| 1.0            | 07/05/2007  | NGC/Byron Earley                          | Baseline document for FINAL.   |
| 2.0            | 12/02/2008  | NGC/Charles Lee                           | Updated to include Territory Beneficiary Eligibility Query and Response (MAPD_0888).   |
| 3.0            | 03/19/2009  | NGC/Charles Lee                           | Updated file format for CMSBEQR to include Part D/RDS Indicator and Uncovered Months Data.   |
| 4.0            | 06/18/2009  | NGC/George Hartley                        | Updates for MAPD 1226: expand valid State Code values; split BEQ and TBQ into separate ICDs.   |
| 4.1            | 09/11/2009  | NGC/George Hartley                        | Corrected typo: “states and territories” replaces “health plans”.  |
| 4.2            | 01/05/2011  | NGC/George Hartley                        | Corrected filler length for position 2889 (was 11; now 14 bytes).  |
| 4.3            | 06/06/2011  | NGC/George Hartley/Linda Plitt            | Converted document into 508-compliant ICD;<br>Added validation email requirements;<br>Updated Valid Values for the Processed Flag field in table 8.  |
| 4.4            | 11/09/2011  | NGC/George Hartley                        | Added 5 new occurrences of Clinical Dialysis dates for MAPD2182 to response file.  |
| 4.5            | 12/01/2011  | NGC/George Hartley                        | MAPD2335 – updated description of valid values for Processed Flag.   |
| 4.6            | 02/05/2013  | NGC/George Hartley                        | Add MMP Opt Out indicator.   |
| 4.7            | 02/05/2015  | NGC/Nancy Porter                          | MAPD2800 – Added acceptance email with counts to Appendix A.<br>MAPD2760 – Changed format of residence address (not currently populated) and replaced single occurrence of Incarcerated Period with Benefit Suspension Period. Added nine more occurrences of Benefit Suspension Period. |
| 4.8            | 02/24/2015  | NGC/Nancy Porter                          | Backed out 2760 changes and updated MAPD2800 changes.  |
| 4.9            | 10/14/2015  | NGC/Nancy Porter                          | Added Medicare Plan Ineligibility Periods (Both Incarceration and Not Lawful),<br>Changed format for the Residence Address.  |
| 5.0            | 11/2/2015   | NGC/Nancy Porter                          | Added Note to description for positions 2873-2882.   |

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| Version | Date       | Organization/<br>Point of Contact | Description of Changes  |
|---------|------------|-----------------------------------|---|
| 5.0     | 11/4/2015  | NGC/Nancy Porter                  | Changed record lengths for response header and trailer.   |
| 5.1     | 12/2/2015  | NGC/Nancy Porter                  | Added explanation that changes to positions 2873-2888, 3196-3339 and 3340-3499 are dependent on implementation of MAPD2760 and MAPD2793.  |
| 5.2     | 5/18/2016  | NGC/Nancy Porter                  | Deleted valid value 'Z99' from Beneficiary's Part A Third Party Premium Payer Code (positions 2020-2022)  |
| 5.3     | 03/12/2017 | NGC/Horace Higgins                | <p>Made the following changes based on CR MAPD3067:</p> <ul style="list-style-type: none"> <li>• Section 6.2.4.2, Data Assembly Characteristics – Changed the value under the Length column in Table 7 from 3600 to 4000;</li> <li>• Section 6.2.4.3, Field/Element Definition – Made the following changes: <ul style="list-style-type: none"> <li>○ For the last row in Table 8 and Table 10 with “Filler” listed under the Data Field column, changed the value under the Length and Position columns;</li> <li>○ Made the following changes to Table 9: <ul style="list-style-type: none"> <li>• Inserted the rows with the six occurrences of the Beneficiary MBI; and</li> <li>• For the last row with “Filler” listed under the Data Field column, changed the value under the Length and Position columns.</li> </ul> </li> <li>• Section 9, Acronyms – Inserted the rows with “CR” and “MBI” listed under the Acronyms column of the corresponding table.</li> </ul> </li> </ul> |
| 5.4     | 05/30/2017 | NGC/Horace Higgins                | Based on feedback received from CMS, changed the values for the Position and Length attributes of some of the data elements listed under the MBI Data section of Table 9.   |

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| Version | Date       | Organization/<br>Point of Contact | Description of Changes  |
|---------|------------|-----------------------------------|---|
| 5.5     | 06/21/2017 | NGC/Horace Higgins                | <p>Made the following changes to specific rows in Table 9 under Section 6.2.4.3, Field/Element Definition, based on CR MAPD3060:</p> <ul style="list-style-type: none"> <li>• For the row with “Beneficiary’s MBI Effective Reason Code (occurrence 1)” listed under the Data Field column, updated the list of codes under the Comments column; and</li> <li>• For the row with “Beneficiary’s MBI End Reason Code (occurrence 1)” listed under the Data Field column, updated the list of codes under the Comments column.</li> </ul> |

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## 1. INTRODUCTION

The Centers for Medicare & Medicaid Services (CMS) created the Common Medicare Environment (CME) database in order to provide a single, enterprise-wide authoritative source for Medicare beneficiary demographic data. The CME database integrated and standardized different types of beneficiary data previously fragmented and often redundant in isolated CMS legacy systems.

Multiple systems control the read and update access to the CME database. These systems and the CME database are collectively known as the Medicare Beneficiary Database Suite of Systems (MBDSS). The MBDSS currently utilizes a batch file processing model for large data feeds, an Application Programmable Interface (API) that allows CMS applications to query and update, and a secure online presentation layer for viewing beneficiary data. For a more detailed overview of new structure of the MBDSS, please refer to the MBDSS Operations & Maintenance Manual (OMM).

The Territory Beneficiary Query (TBQ) is a data exchange between CMS and states and territories. States and territories query CMS for Medicare beneficiary eligibility determinations and MBDSS returns a file with this information.

This Interface Control Document (ICD) specifies the interface requirements to be met by the participating systems. It describes the concept of operations for the interface, defines the message structure and protocols that govern the interchange of data, and identifies the communication paths along which the data are expected to flow.

For each interface, the following information will be provided:

- A general description of the interface;
- Assumptions where appropriate;
- A description of the data exchange format and protocol for exchange; and
- Estimated size and frequency of data exchange.

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## 2. REFERENCED DOCUMENTS

**Table 1: Referenced Documents**

| Document Name                           | Document Number         | Issuance Date |
|---|-------------------------|---------------|
| CME Data Dictionary                     | N/A                     | 07/23/2010    |
| CMS Problem Management Tracking Process | PRJ.PMM.0201.05.0.0111  | 01/03/2011    |
| MBD Data Dictionary                     | N/A                     | 07/09/2010    |
| MBDSS Operations & Maintenance Manual   | MBDOMM002.3             | 02/23/2011    |
| MBDSS System Design Document            | MMA.PRJ.1601.01.16.0215 | 02/03/2015    |

### **3. OVERVIEW**

To determine dual eligibility status for specific beneficiaries, participating states and territories will request information from MBDSS. MBDSS will validate the incoming file and send an email to the state indicating acceptance or rejection of the file. If the file is rejected, no further action is taken. If the file is accepted, MBDSS will send a file containing the latest entitlement data for the matched beneficiaries.

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### **4. ASSUMPTIONS/CONSTRAINTS/RISKS**

This section describes assumptions, constraints, and risks associated with the interface.

#### **4.1. Assumptions**

States use this information to determine beneficiary entitlement and enrollment information as part of the process for Low-Income Subsidy (LIS) enrollment.

#### **4.2. Constraints**

Please refer to the MBDSS OMM for scheduling dependencies.

#### **4.3. Risks**

States may have difficulty processing LIS enrollments.

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### **5. GENERAL INTERFACE REQUIREMENTS**

This section describes general requirements for the interface.

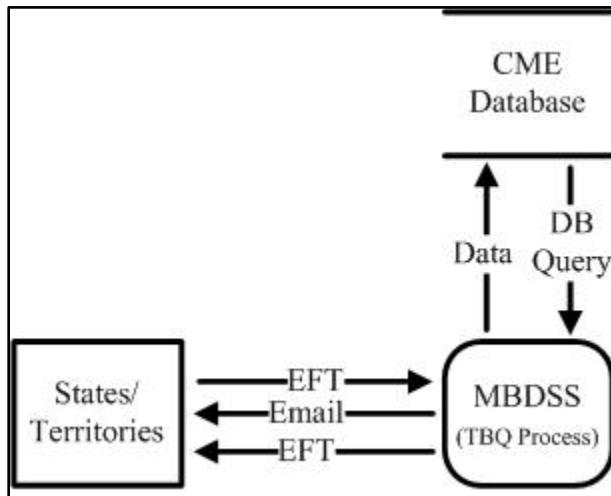
#### **5.1. Interface Overview**

The TBQ exchange allows participating states and territories to request, on a daily basis if desired, Medicare/Medicaid eligibility information from the MBDSS for specific beneficiaries. The MBDSS will validate the incoming file and send an email to the state/territory indicating acceptance or rejection of the file. The MBDSS will send a response file for each inquiry file received. The states and territories will use this information to determine dual eligibility status.

#### **5.2. Functional Allocation**

The MBDSS creates and sends an email upon validation of the query file. MBDSS creates one response file for each inquiry file received.

### 5.3. Data Transfer



**Figure 1: Data Transfer Diagram**

1. State/Territory will submit a file (MMATBQ) requesting beneficiary data.
2. MBDSS will validate the incoming file and send an email to the state/territory indicating acceptance or rejection of the file.
3. MBDSS will record the incoming record on the transaction log table.
4. MBDSS will query the CME database for eligibility information for the requested beneficiaries.
5. MBDSS will return a file (MMATBQR) containing the latest data for all successfully validated beneficiaries. For rejected beneficiaries, only the incoming fields are returned along with a Processing Flag indicating the reason for rejection.

### 5.4. Transactions

The inbound file contains inquiry transactions. The outbound file contains response transactions.

### 5.5. Security and Integrity

The files are transmitted using the CMS Electronic File Transfer (EFT) process over a secure connection on the Medicare Data Communications Network (MDCN).

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## 6. DETAILED INTERFACE REQUIREMENTS

This section describes detailed requirements for the interface.

## **6.1. TBQ Query File and Email Requirements**

The MBDSS shall accept a query file from a state or territory. This file shall contain records identifying the beneficiaries of interest to the sender and will be used to query the CME database. The MBDSS shall validate the file and send an email to the state/territory indicating acceptance or rejection of the query file.

### **6.1.1. Assumptions**

The CMS Consolidated Information Technology Infrastructure Contract (CITIC) contractor is responsible for management of the EFT process used by this interface.

### **6.1.2. General Processing Steps**

Processing steps are documented in section 5.3.

### **6.1.3. Interface Processing Time Requirements**

Inbound files are accepted daily. Upon file validation, an email is sent back indicating acceptance or rejection of the file. Please refer to the MBDSS OMM for additional details.

### **6.1.4. Message Format (or Record Layout) and Required Protocols**

The following sections contain filenames and detailed record layouts for the TBQ query file and email.

#### **6.1.4.1. File Layout**

- The TBQ Query file has three types of records:
  - Header Record – The header record is the first record of the file; it will occur only once.
  - Detail Record – One detail record contains information for one beneficiary; the file contains one detail record for each beneficiary.
  - Trailer Record – The trailer record is the last record of the file; it will occur only once.
- The TBQ email is sent to the state/territory after file validation. See Appendix A for additional information and email templates. APPENDIX A describes how the data will appear in the record for each data type.

**Table 2: Data Type Representation**

| Data Type | Representation in Record |
|-----------|--------------------------|
| CHAR      | Alphanumeric characters  |
| NUM       | Numeric characters 0 – 9 |

### 6.1.4.2. Data Assembly Characteristics

See the following table for the dataset names, format, and frequency of files.

**Table 3: Territory-to-CMS Query File – Data Assembly Characteristics**

| DSN                                       | Description   | Struc     | Copybook | Len | Fmt | Access Method | Vol                                      | Update Frequency                                    |
|---|---|-----------|----------|-----|-----|---------------|--|---|
| P#MBD.IN.EFT.CMS*.TBQ.DY<br>YMMDD.THHMMSS | Inquiry file from states/territories requesting beneficiary data. | Flat file | N/A      | 100 | FB  | Seq           | Varies (i.e., Puerto Rico 900k records.) | Varies (i.e. Puerto Rico sends one file per month.) |

### 6.1.4.3. Field/Element Definition

These are brief descriptions of the TBQ query file.

**Table 4: Territory-to-CMS Query File – Header Record**

| Data Field   | Length | Position | Type | Comments  |
|--------------|--------|----------|------|---|
| Header Code  | 8      | 1 – 8    | CHAR | ‘MMATBQH’   |
| State Code   | 2      | 9 – 10   | CHAR | ‘DC’, ‘AL’, ‘AK’, ‘AZ’,<br>‘AR’, ‘CA’, ‘CO’, ‘CT’,<br>‘DE’, ‘FL’, ‘GA’, ‘HI’,<br>‘ID’, ‘IL’, ‘IN’, ‘IA’, ‘KS’,<br>‘KY’, ‘LA’, ‘ME’, ‘MD’,<br>‘MA’, ‘MI’, ‘MN’, ‘MS’,<br>‘MO’, ‘MT’, ‘NE’, ‘NV’,<br>‘NH’, ‘NJ’, ‘NM’, ‘NY’,<br>‘NC’, ‘ND’, ‘OH’, ‘OK’,<br>‘OR’, ‘PA’, ‘RI’, ‘SC’,<br>‘SD’, ‘TN’, ‘TX’, ‘UT’,<br>‘VT’, ‘VA’, ‘WA’, ‘WV’,<br>‘WI’, ‘WY’, ‘AS’, ‘GU’,<br>‘MP’, ‘PR’, or ‘VI’. |
| Create Month | 2      | 11 – 12  | NUM  | Format is MM.   |
| Create Year  | 4      | 13 – 16  | NUM  | Format is CCYY.   |
| Filler       | 84     | 17 – 100 | CHAR | Spaces.   |

**Table 5: Territory-to-CMS Query File – Detail Record**

| Data Field                              | Length | Position | Type | Comments          |
|---|--------|----------|------|-------------------|
| Record Type                             | 3      | 1 – 3    | CHAR | ‘DTL’.            |
| Beneficiary’s Social Security Number    | 9      | 4 – 12   | CHAR | No comments       |
| Beneficiary’s First Name                | 15     | 13 – 27  | CHAR | No comments       |
| Beneficiary’s Last Name                 | 20     | 28 – 47  | CHAR | No comments       |
| Beneficiary’s Middle Initial (Optional) | 1      | 48       | CHAR | No comments       |
| Beneficiary’s Date of Birth             | 8      | 49 – 56  | CHAR | CCYYMMDD.         |
| Beneficiary’s Gender Code               | 1      | 57 – 57  | CHAR | ‘M’, ‘F’, or ‘U’. |
| Family ID                               | 11     | 58 – 68  | CHAR | No comments       |
| Member Suffix                           | 2      | 69 – 70  | CHAR | No comments       |
| MPI                                     | 13     | 71 – 83  | CHAR | No comments       |
| Filler                                  | 17     | 84 – 100 | CHAR | Spaces.           |

**Table 6: Territory-to-CMS Query File – Trailer Record**

| Data Field          | Length | Position | Type | Comments    |
|---------------------|--------|----------|------|-------------|
| Trailer Code        | 8      | 1 – 8    | CHAR | ‘MMATBQT’.  |
| Detail Record Count | 9      | 9 – 17   | NUM  | No comments |
| Filler              | 83     | 18 – 100 | CHAR | Spaces.     |

### 6.1.5. Communication Methods

This section describes communication methods used by the interface as well as error recovery.

#### 6.1.5.1. Interface Initiation

The TBQ jobs are automatically triggered upon successful receipt of an inbound state/territory file.

#### 6.1.5.2. Flow Control

The inbound files are processed in the CMS mainframe environment.

CMS/partner will notify us in the event of a transmission failure. There is also a daily EFT transmissions report sent from the CMS CITIC contractor to the maintainers.

If there are any problems processing an inbound file, the recovery will depend on the nature of the error and where the error occurred. Typically, the file is resubmitted for processing and the process resumes from the point at which the error occurred. Please refer to the Automated Production Control & Scheduling System (APCSS) production control documentation for additional recovery details.

The APCSS documentation provides details on exchange related jobs, processes, file names, error codes, and handling procedures.

### 6.1.6. Security Requirements

Please see section 5.5.

## 6.2. TBQ Response File Requirements

The MBDSS shall create a response file for each corresponding query file from a state or territory. The response file shall contain beneficiary entitlement information for each matched beneficiary requested in the query file. The response file shall be transmitted to the state/territory via CMS’ EFT process.

### **6.2.1. Assumptions**

The CMS CITIC contractor is responsible for management of the EFT process used by this interface.

### **6.2.2. General Processing Steps**

Processing steps are documented in section 5.3.

### **6.2.3. Interface Processing Time Requirements**

One outbound file is created and sent daily for every query file received. Please refer to the MBDSS OMM for additional details.

### **6.2.4. Message Format (or Record Layout) and Required Protocols**

The following sections contain filenames and detailed record layouts for the TBQ Response File.

#### **6.2.4.1. File Layout**

The TBQ Response file has three types of records:

- Header Record – The header record is the first record of the file; it will occur only once.
- Detail Record – One detail record contains information for one beneficiary; the file contains one detail record for each beneficiary.
- Trailer Record – The trailer record is the last record of the file; it will occur only once.

### 6.2.4.2. Data Assembly Characteristics

See the following table for the dataset names, format, and frequency of files.

**Table 7: CMS-to-Territory Response File – Data Assembly Characteristics**

| DSN  | Description   | Struc     | Copybook | Len  | Fmt | Access Method | Vol    | Update Frequency   |
|--|---|-----------|----------|------|-----|---------------|--------|--|
| P#MBD.#MBDP000.TBQRPLY.*<br>*.D*.T*<br><br>(** is the Postal State Code) | Response file from CMS containing beneficiary data for matched beneficiaries in the inquiry file. | Flat file | N/A      | 4000 | FB  | Seq           | Varies | Varies (one response file for each inquiry file received.) |

### 6.2.4.3. Field/Element Definition

These are brief descriptions of the TBQ Response file transactions. Additional valid values may be contained in the CME and MBD Data Dictionaries.

**Table 8: CMS-to-Territory Response File – Header Record**

| Data Field         | Length | Position  | Type | Comments    |
|--------------------|--------|-----------|------|-------------|
| Header Code        | 8      | 1 – 8     | CHAR | ‘MMATBQRH’. |
| File Creation Date | 8      | 9 – 16    | NUM  | CCYYMMDD.   |
| Filler             | 3984   | 17 – 4000 | CHAR | Spaces.     |

**Table 9: CMS-to-Territory Response File – Detail Record**

| Data Field                             | Length | Position | Type | Comments          |
|--|--------|----------|------|-------------------|
| <b>Start of Original Detail Record</b> |        |          |      |                   |
| Record Type                            | 3      | 1 – 3    | CHAR | ‘DTL’             |
| Beneficiary’s Social Security Number   | 9      | 4 – 12   | CHAR | No comments       |
| Beneficiary’s First Name               | 15     | 13 – 27  | CHAR | No comments       |
| Beneficiary’s Last Name                | 20     | 28 – 47  | CHAR | No comments       |
| Beneficiary’s Middle Initial           | 1      | 48       | CHAR | No comments       |
| Beneficiary’s Date of Birth            | 8      | 49 – 56  | CHAR | CCYYMMDD.         |
| Beneficiary’s Gender Code              | 1      | 57 – 57  | CHAR | ‘M’, ‘F’, or ‘U’. |
| Family ID                              | 11     | 58 – 68  | CHAR | No comments       |
| Member Suffix                          | 2      | 69 – 70  | CHAR | No comments       |
| MPI                                    | 13     | 71 – 83  | CHAR | No comments       |
| <b>End of Original Detail Record</b>   |        |          |      |                   |

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| Data Field  | Length | Position  | Type | Comments   |
|---|--------|-----------|------|--|
| Processed Flag  | 2      | 84 – 85   | CHAR | 00 = Successfully Processed.<br>01 = Detail Record Identifier not 'DTL'.<br>02 = SSN Missing.<br>03 = First Name Missing.<br>04 = Last Name Missing.<br>05 = Gender Code Missing.<br>06 = Date of Birth Missing.<br>07 = Beneficiary Not Found.<br>08 = Successfully processed, but beneficiary not entitled to Part A and/or Part B.<br>09 = More than One Beneficiary Found. |
| Filler  | 151    | 86 – 236  | CHAR | Spaces.  |
| <b>Beneficiary Information</b>                                    |        |           |      |  |
| Beneficiary's Claim Account Number                                | 9      | 237 – 245 | CHAR | No comments  |
| Beneficiary's Identification Code                                 | 2      | 246 – 247 | CHAR | No comments  |
| Beneficiary's Date of Birth                                       | 8      | 248 – 255 | NUM  | MMDDCCYY.  |
| Beneficiary's Date of Death                                       | 8      | 256 – 263 | NUM  | MMDDCCYY.  |
| Beneficiary's Gender Code   | 1      | 264       | CHAR | '0', '1', or '2'.  |
| Beneficiary's First Name  | 30     | 265 – 294 | CHAR | No comments  |
| Beneficiary's Middle Initial                                      | 1      | 295       | CHAR | No comments  |
| Beneficiary's Last Name   | 40     | 296 – 335 | CHAR | No comments  |
| <b>Cross Reference Numbers (10 occurrences)</b>                   |        |           |      |  |
| Cross Reference Beneficiary's Claim Account Number (occurrence 1) | 9      | 336 – 344 | CHAR | No comments  |

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| Data Field   | Length | Position  | Type | Comments    |
|--|--------|-----------|------|-------------|
| Cross Reference Beneficiary's Identification Code (occurrence 1) | 2      | 345 – 346 | CHAR | No comments |
| Cross Reference (occurrence 2)                                   | 11     | 347 – 357 | CHAR | No comments |
| Cross Reference (occurrence 3)                                   | 11     | 358 – 368 | CHAR | No comments |
| Cross Reference (occurrence 4)                                   | 11     | 369 – 379 | CHAR | No comments |
| Cross Reference (occurrence 5)                                   | 11     | 380 – 390 | CHAR | No comments |
| Cross Reference (occurrence 6)                                   | 11     | 391 – 401 | CHAR | No comments |
| Cross Reference (occurrence 7)                                   | 11     | 402 – 412 | CHAR | No comments |
| Cross Reference (occurrence 8)                                   | 11     | 413 – 423 | CHAR | No comments |
| Cross Reference (occurrence 9)                                   | 11     | 424 – 434 | CHAR | No comments |
| Cross Reference (occurrence 10)                                  | 11     | 435 – 445 | CHAR | No comments |
| <b>Social Security Numbers (5 occurrences)</b>                   |        |           |      |             |
| Social Security Number (occurrence 1)                            | 9      | 446 – 454 | CHAR | No comments |
| Social Security Number (occurrence 2)                            | 9      | 455 – 463 | CHAR | No comments |
| Social Security Number (occurrence 3)                            | 9      | 464 – 472 | CHAR | No comments |
| Social Security Number (occurrence 4)                            | 9      | 473 – 481 | CHAR | No comments |
| Social Security Number (occurrence 5)                            | 9      | 482 – 490 | CHAR | No comments |
| <b>Mailing Address</b>   |        |           |      |             |
| Mailing Address Line 1   | 40     | 491 – 530 | CHAR | No comments |
| Mailing Address Line 2   | 40     | 531 – 570 | CHAR | No comments |
| Mailing Address Line 3   | 40     | 571 – 610 | CHAR | No comments |
| Mailing Address Line 4   | 40     | 611 – 650 | CHAR | No comments |
| Mailing Address Line 5   | 40     | 651 – 690 | CHAR | No comments |
| Mailing Address Line 6   | 40     | 691 – 730 | CHAR | No comments |
| Mailing Address City Name  | 40     | 731 – 770 | CHAR | No comments |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| <b>Data Field</b>  | <b>Length</b> | <b>Position</b> | <b>Type</b> | <b>Comments</b>                                  |
|--|---------------|-----------------|-------------|--|
| Mailing Address State Code                                       | 2             | 771 – 772       | CHAR        | No comments                                      |
| Mailing Address Zone Improvement Plan (Zip) Code                 | 9             | 773 – 781       | CHAR        | No comments                                      |
| Mailing Address Change Date                                      | 8             | 782 – 789       | NUM         | MMDDCCYY.  |
| <b>Residence Address</b>   |               |                 |             |  |
| Residence Address Line 1   | 60            | 790 – 849       | CHAR        | No comments                                      |
| Filler   | 180           | 850 – 1029      | CHAR        | No comments                                      |
| Residence Address City Name                                      | 40            | 1030 – 1069     | CHAR        | No comments                                      |
| Residence Address State Code                                     | 2             | 1070 – 1071     | CHAR        | No comments                                      |
| Residence Address Zip Code                                       | 9             | 1072 – 1080     | CHAR        | No comments                                      |
| Residence Address Change Date                                    | 8             | 1081 – 1088     | NUM         | MMDDCCYY   |
| <b>Representative Payee</b>                                      |               |                 |             |  |
| Beneficiary's Representative Payee Switch                        | 1             | 1089            | CHAR        | 'Y', 'N', or a space.                            |
| <b>Non-Entitlement Status</b>                                    |               |                 |             |  |
| Part A Non-Entitlement Status Code                               | 1             | 1090            | CHAR        | 'D', 'F', 'H', 'N', 'R', or a space.             |
| Part B Non-Entitlement Status Code                               | 1             | 1091            | CHAR        | 'D', 'N', 'R', or a space.                       |
| <b>Entitlement Reason (5 occurrences)</b>                        |               |                 |             |  |
| Beneficiary's Entitlement Reason Code Change Date (occurrence 1) | 8             | 1092 – 1099     | NUM         | Zeroes.  |
| Beneficiary's Entitlement Reason Code (occurrence 1)             | 4             | 1100 – 1103     | CHAR        | Spaces.  |
| Entitlement Reason (occurrence 2)                                | 12            | 1104 – 1115     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Entitlement Reason (occurrence 3)                                | 12            | 1116 – 1127     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Entitlement Reason (occurrence 4)                                | 12            | 1128 – 1139     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| Data Field   | Length | Position    | Type  | Comments   |
|--|--------|-------------|-------|--|
| Entitlement Reason (occurrence 5)                          | 12     | 1140 – 1151 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                                       |
| <b>Part A Entitlement (5 occurrences)</b>                  |        |             |       |  |
| Beneficiary's Part A Entitlement Start Date (occurrence 1) | 8      | 1152 – 1159 | NUM   | MMDDCCYY.  |
| Beneficiary's Part A Entitlement End Date (occurrence 1)   | 8      | 1160 – 1167 | NUM   | MMDDCCYY.  |
| Beneficiary's Part A Enrollment Reason Code (occurrence 1) | 1      | 1168        | CHAR  | 'A', 'B', 'D', 'G', 'I', 'J', 'K', 'L', 'M', 'N', 'P', 'Q', 'R', 'T', 'U', or a space. |
| Beneficiary's Part A Enrollment Status Code (occurrence 1) | 1      | 1169        | CHAR  | 'C', 'E', 'F', 'G', 'S', 'T', 'W', 'X', 'Y', or a space.                               |
| Part A Entitlement (occurrence 2)                          | 18     | 1170 – 1187 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                                       |
| Part A Entitlement (occurrence 3)                          | 18     | 1188 – 1205 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                                       |
| Part A Entitlement (occurrence 4)                          | 18     | 1206 – 1223 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                                       |
| Part A Entitlement (occurrence 5)                          | 18     | 1224 – 1241 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                                       |
| <b>Part B Entitlement (5 occurrences)</b>                  |        |             |       |  |
| Beneficiary's Part B Entitlement Start Date (occurrence 1) | 8      | 1242 – 1249 | NUM   | MMDDCCYY.  |
| Beneficiary's Part B Entitlement End Date (occurrence 1)   | 8      | 1250 – 1257 | NUM   | MMDDCCYY.  |
| Beneficiary's Part B Enrollment Reason Code (occurrence 1) | 1      | 1258        | CHAR  | 'B', 'C', 'D', 'F', 'G', 'I', 'K', 'M', 'S', 'U', or a space.                          |
| Beneficiary's Part B Enrollment Status Code (occurrence 1) | 1      | 1259        | CHAR  | 'C', 'F', 'G', 'S', 'T', 'W', 'Y', or ' '.   |
| Part B Entitlement (occurrence 2)                          | 18     | 1260 – 1277 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                                       |
| Part B Entitlement (occurrence 3)                          | 18     | 1278 – 1295 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                                       |
| Part B Entitlement (occurrence 4)                          | 18     | 1296 – 1313 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                                       |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| Data Field  | Length | Position    | Type  | Comments   |
|---|--------|-------------|-------|--|
| Part B Entitlement (occurrence 5)   | 18     | 1314 – 1331 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| <b>Hospice Coverage (5 occurrences)</b>   |        |             |       |  |
| Beneficiary Hospice Coverage Start Date (occurrence 1)                                  | 8      | 1332 – 1339 | NUM   | MMDDCCYY.  |
| Beneficiary Hospice Coverage End Date (occurrence 1)                                    | 8      | 1340 – 1347 | NUM   | MMDDCCYY.  |
| Hospice Coverage (occurrence 2)   | 16     | 1348 – 1363 | NUM   | See comments for the 1 <sup>st</sup> occurrence. |
| Hospice Coverage (occurrence 3)   | 16     | 1364 – 1379 | NUM   | See comments for the 1 <sup>st</sup> occurrence. |
| Hospice Coverage (occurrence 4)   | 16     | 1380 – 1395 | NUM   | See comments for the 1 <sup>st</sup> occurrence. |
| Hospice Coverage (occurrence 5)   | 16     | 1396 – 1411 | NUM   | See comments for the 1 <sup>st</sup> occurrence. |
| Beneficiary Disability Insurance Benefits Entitlement Start Date (occurrence 1)         | 8      | 1412 – 1419 | NUM   | MMDDCCYY.  |
| Beneficiary Disability Insurance Benefits Entitlement End Date (occurrence 1)           | 8      | 1420 – 1427 | NUM   | MMDDCCYY.  |
| Beneficiary Disability Insurance Benefits Entitlement Justification Code (occurrence 1) | 1      | 1428        | CHAR  | ‘1’, ‘A’, ‘H’, or a space.                       |
| Disability Insurance Benefits (occurrence 2)  | 17     | 1429 – 1445 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Disability Insurance Benefits (occurrence 3)  | 17     | 1446 – 1462 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Beneficiary's Group Health Organization Enrollment Start Date (occurrence 1)            | 8      | 1463 – 1470 | NUM   | MMDDCCYY.  |
| Beneficiary's Group Health Organization Enrollment End Date (occurrence 1)              | 8      | 1471 – 1478 | NUM   | MMDDCCYY.  |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| Data Field   | Length | Position    | Type  | Comments   |
|--|--------|-------------|-------|--|
| Beneficiary's Group Health Organization Contract Number (occurrence 1) | 5      | 1479 – 1483 | CHAR  | No comments                                      |
| Group Health Organization (occurrence 2)                               | 21     | 1484 – 1504 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Group Health Organization (occurrence 3)                               | 21     | 1505 – 1525 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Group Health Organization (occurrence 4)                               | 21     | 1526 – 1546 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Group Health Organization (occurrence 5)                               | 21     | 1547 – 1567 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Group Health Organization (occurrence 6)                               | 21     | 1568 – 1588 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Group Health Organization (occurrence 7)                               | 21     | 1589 – 1609 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Group Health Organization (occurrence 8)                               | 21     | 1610 – 1630 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Group Health Organization (occurrence 9)                               | 21     | 1631 – 1651 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Group Health Organization (occurrence 10)                              | 21     | 1652 – 1672 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| <b>Plan Benefits Package Election (10 occurrences)</b>                 |        |             |       |  |
| Group Health Plan Enrollment Effective Date (occurrence 1)             | 8      | 1673 – 1680 | NUM   | MMDDCCYY.  |
| Plan Benefits Package Start Date (occurrence 1)                        | 8      | 1681 – 1688 | NUM   | MMDDCCYY.  |
| Plan Benefits Package End Date (occurrence 1)                          | 8      | 1689 – 1696 | NUM   | MMDDCCYY.  |
| Plan Benefits Package Number (occurrence 1)                            | 3      | 1697 – 1699 | CHAR  | No comments                                      |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| <b>Data Field</b>  | <b>Length</b> | <b>Position</b> | <b>Type</b> | <b>Comments</b>                                  |
|--|---------------|-----------------|-------------|--|
| Plan Benefits Package Coverage Type Code (occurrence 1)  | 2             | 1700 – 1701     | CHAR        | No comments                                      |
| PBP Election (occurrence 2)  | 29            | 1702 – 1730     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| PBP Election (occurrence 3)  | 29            | 1731 – 1759     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| PBP Election (occurrence 4)  | 29            | 1760 – 1788     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| PBP Election (occurrence 5)  | 29            | 1789 – 1817     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| PBP Election (occurrence 6)  | 29            | 1818 – 1846     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| PBP Election (occurrence 7)  | 29            | 1847 – 1875     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| PBP Election (occurrence 8)  | 29            | 1876 – 1904     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| PBP Election (occurrence 9)  | 29            | 1905 – 1933     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| PBP Election (occurrence 10)   | 29            | 1934 – 1962     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| <b>End Stage Renal Disease Coverage</b>  |               |                 |             |  |
| Beneficiary's ESRD Coverage Start Date   | 8             | 1963 – 1970     | NUM         | MMDDCCYY.  |
| Beneficiary's ESRD Coverage End Date   | 8             | 1971 – 1978     | NUM         | MMDDCCYY.  |
| Beneficiary's ESRD Termination Reason Code   | 1             | 1979            | CHAR        | 'A', 'B', 'C', 'D', 'E', or a space.             |
| <b>End Stage Renal Disease Clinical Dialysis Dates Occurrence 1 (refer to position 3114 for 5 remaining occurrences)</b> |               |                 |             |  |
| Beneficiary's ESRD Clinical Dialysis Start Date  | 8             | 1980 – 1987     | NUM         | MMDDCCYY.  |
| Beneficiary's ESRD Clinical Dialysis End Date  | 8             | 1988 – 1995     | NUM         | MMDDCCYY.  |
| <b>End Stage Renal Disease Transplant</b>  |               |                 |             |  |

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| Data Field  | Length | Position    | Type  | Comments  |
|---|--------|-------------|-------|---|
| Beneficiary's ESRD Transplant Start Date                                | 8      | 1996 – 2003 | NUM   | MMDDCCYY.   |
| Beneficiary's ESRD Transplant End Date                                  | 8      | 2004 – 2011 | NUM   | MMDDCCYY.   |
| <b>Third Party Part A History (5 occurrences)</b>                       |        |             |       |   |
| Beneficiary's Part A Third Party Start Date (occurrence 1)              | 8      | 2012 – 2019 | NUM   | MMDDCCYY.   |
| Beneficiary's Part A Third Party Premium Payer Code (occurrence 1)      | 3      | 2020 – 2022 | CHAR  | 'S01 – S99' and 'T01 – Z98'.  |
| Beneficiary's Part A Third Party End Date (occurrence 1)                | 8      | 2023 – 2030 | NUM   | MMDDCCYY.   |
| Beneficiary's Part A Third Party Buy In Eligibility Code (occurrence 1) | 1      | 2031        | CHAR  | 'A', 'B', 'C', 'D', 'E', 'F', 'G', 'H', 'M', or 'Z'.                            |
| Third Party Part A History (occurrence 2)                               | 20     | 2032 – 2051 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                                |
| Third Party Part A History (occurrence 3)                               | 20     | 2052 – 2071 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                                |
| Third Party Part A History (occurrence 4)                               | 20     | 2072 – 2091 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                                |
| Third Party Part A History (occurrence 5)                               | 20     | 2092 – 2111 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                                |
| <b>Third Party Part B History (5 occurrences)</b>                       |        |             |       |   |
| Beneficiary's Part B Third Party Start Date (occurrence 1)              | 8      | 2112 – 2119 | NUM   | MMDDCCYY.   |
| Beneficiary's Part B Third Party Premium Payer Code (occurrence 1)      | 3      | 2120 – 2122 | CHAR  | '000', '001', '005', '006', '007', '008', '010 – 650', '700' 'A01 – R99' or ''. |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| Data Field  | Length | Position    | Type  | Comments  |
|---|--------|-------------|-------|---|
| Beneficiary's Part B Third Party Termination Date (occurrence 1)        | 8      | 2123 – 2130 | NUM   | MMDDCCYY.   |
| Beneficiary's Part B Third Party Buy In Eligibility Code (occurrence 1) | 1      | 2131        | CHAR  | 'A', 'B', 'C', 'D', 'E', 'F', 'G', 'H', 'M', 'P', or 'Z'. |
| Third Party Part B History (occurrence 2)                               | 20     | 2132 – 2151 | Mixed | See comments for the 1 <sup>st</sup> occurrence.          |
| Third Party Part B History (occurrence 3)                               | 20     | 2152 – 2171 | Mixed | See comments for the 1 <sup>st</sup> occurrence.          |
| Third Party Part B History (occurrence 4)                               | 20     | 2172 – 2191 | Mixed | See comments for the 1 <sup>st</sup> occurrence.          |
| Third Party Part B History (occurrence 5)                               | 20     | 2192 – 2211 | Mixed | See comments for the 1 <sup>st</sup> occurrence.          |
| <b>Part D Data Elements</b>   |        |             |       |   |
| Beneficiary's First Eligibility Part D Date                             | 8      | 2212 – 2219 | NUM   | MMDDCCYY.   |
| Beneficiary's Affirmatively Decline Indicator                           | 1      | 2220        | CHAR  | 'Y', 'N', or a space.                                     |
| <b>Beneficiary's Co-Payment History (10 occurrences)</b>                |        |             |       |   |
| Beneficiary's LIS Type (occurrence 1)                                   | 1      | 2221        | CHAR  | 'L' or 'D'.   |
| Beneficiary's Co-Payment Level (occurrence 1)                           | 1      | 2222        | CHAR  | '1', '2', '3', or '4'.                                    |
| Beneficiary's Co-Payment Start Date (occurrence 1)                      | 8      | 2223 – 2230 | NUM   | MMDDCCYY.   |
| Beneficiary's Co-Payment End Date (occurrence 1)                        | 8      | 2231 – 2238 | NUM   | MMDDCCYY.   |
| Co-Payment History (occurrence 2)                                       | 18     | 2239 – 2256 | Mixed | See comments for the 1 <sup>st</sup> occurrence.          |
| Co-Payment History (occurrence 3)                                       | 18     | 2257 – 2274 | Mixed | See comments for the 1 <sup>st</sup> occurrence.          |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| <b>Data Field</b>   | <b>Length</b> | <b>Position</b> | <b>Type</b> | <b>Comments</b>                                  |
|---|---------------|-----------------|-------------|--|
| Co-Payment History (occurrence 4)                         | 18            | 2275 – 2292     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Co-Payment History (occurrence 5)                         | 18            | 2293 – 2310     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Co-Payment History (occurrence 6)                         | 18            | 2311 – 2328     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Co-Payment History (occurrence 7)                         | 18            | 2329 – 2346     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Co-Payment History (occurrence 8)                         | 18            | 2347 – 2364     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Co-Payment History (occurrence 9)                         | 18            | 2365 – 2382     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Co-Payment History (occurrence 10)                        | 18            | 2383 – 2400     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| <b>Part D Plan Benefit Package (10 occurrences)</b>       |               |                 |             |  |
| Beneficiary's Contract Number (occurrence 1)              | 5             | 2401 – 2405     | CHAR        | No comments                                      |
| Beneficiary's Part D Enrollment Start Date (occurrence 1) | 8             | 2406 – 2413     | NUM         | MMDDCCYY.  |
| Beneficiary's Part D Enrollment End Date (occurrence 1)   | 8             | 2414 – 2421     | NUM         | MMDDCCYY.  |
| Beneficiary's Part D PBP Plan Number (occurrence 1)       | 3             | 2422 – 2424     | CHAR        | No comments                                      |
| Beneficiary's Enrollment Type Indicator (occurrence 1)    | 1             | 2425            | CHAR        | 'A', 'B', 'C', 'D', 'E', 'F', 'G', 'H', or 'I'.  |
| Part D Plan Benefit Package (occurrence 2)                | 25            | 2426 – 2450     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Part D Plan Benefit Package (occurrence 3)                | 25            | 2451 – 2475     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Part D Plan Benefit Package (occurrence 4)                | 25            | 2476 – 2500     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Part D Plan Benefit Package (occurrence 5)                | 25            | 2501 – 2525     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Part D Plan Benefit Package (occurrence 6)                | 25            | 2526 – 2550     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |
| Part D Plan Benefit Package (occurrence 7)                | 25            | 2551 – 2575     | Mixed       | See comments for the 1 <sup>st</sup> occurrence. |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| Data Field                                  | Length | Position    | Type  | Comments   |
|---|--------|-------------|-------|--|
| Part D Plan Benefit Package (occurrence 8)  | 25     | 2576 – 2600 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                         |
| Part D Plan Benefit Package (occurrence 9)  | 25     | 2601 – 2625 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                         |
| Part D Plan Benefit Package (occurrence 10) | 25     | 2626 – 2650 | Mixed | See comments for the 1 <sup>st</sup> occurrence.                         |
| Part C Organization Name                    | 55     | 2651 – 2705 | CHAR  | No comments  |
| Part C Plan Name                            | 50     | 2706 – 2755 | CHAR  | No comments  |
| Part D Organization Name                    | 55     | 2756 – 2810 | CHAR  | No Comments  |
| Part D Organization Plan Name               | 50     | 2811 – 2860 | CHAR  | No comments  |
| Part D Organization Plan Benefit            | 1      | 2861        | CHAR  | <i>Future use</i>  |
| Beneficiary Language Indicator              | 1      | 2862        | CHAR  | ‘C’, ‘D’, ‘E’, ‘F’, ‘G’, ‘I’, ‘J’, ‘N’, ‘P’, ‘R’, ‘S’, ‘V’, ‘W’, or ‘ ‘. |
| Special Needs Plan Indicator (occurrence 1) | 1      | 2863        | CHAR  | ‘Y’ or ‘N’ or Space (not applicable).                                    |
| Special Needs Plan Indicator (occurrence 2) | 1      | 2864        | CHAR  | ‘Y’ or ‘N’ or Space (not applicable).                                    |
| Special Needs Plan Indicator (occurrence 3) | 1      | 2865        | CHAR  | ‘Y’ or ‘N’ or Space (not applicable).                                    |
| Special Needs Plan Indicator (occurrence 4) | 1      | 2866        | CHAR  | ‘Y’ or ‘N’ or Space (not applicable).                                    |
| Special Needs Plan Indicator (occurrence 5) | 1      | 2867        | CHAR  | ‘Y’ or ‘N’ or Space (not applicable).                                    |
| Special Needs Plan Indicator (occurrence 6) | 1      | 2868        | CHAR  | ‘Y’ or ‘N’ or Space (not applicable).                                    |
| Special Needs Plan Indicator (occurrence 7) | 1      | 2869        | CHAR  | ‘Y’ or ‘N’ or Space (not applicable).                                    |
| Special Needs Plan Indicator (occurrence 8) | 1      | 2870        | CHAR  | ‘Y’ or ‘N’ or Space (not applicable).                                    |

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| Data Field   | Length | Position    | Type | Comments   |
|--|--------|-------------|------|--|
| Special Needs Plan Indicator (occurrence 9)  | 1      | 2871        | CHAR | 'Y' or 'N' or Space (not applicable).            |
| Special Needs Plan Indicator (occurrence 10)   | 1      | 2872        | CHAR | 'Y' or 'N' or Space (not applicable).            |
| <b>Medicare Plan Ineligibility Due to Incarceration Periods.</b><br><b>Note: Until MAPD2760 (Adding Plan Ineligibility Periods Due To Incarceration) is implemented, positions 2873-2888 will continue to display the beneficiary's latest incarceration period. Occurrences two through ten (positions 3196-3339) will be filled with spaces.</b> |        |             |      |  |
| Medicare Plan Ineligibility Due to Incarceration Start Date (occurrence 1)   | 8      | 2873 – 2880 | NUM  | MMDDCCYY.  |
| Medicare Plan Ineligibility Due to Incarceration End Date (occurrence 1)   | 8      | 2881 – 2888 | NUM  | MMDDCCYY.  |
| Filler   | 14     | 2889 – 2902 | CHAR | Spaces.  |
| <b>RDS Coverage Periods (5 occurrences)</b>  |        |             |      |  |
| RDS Start Date (occurrence 1)  | 8      | 2903 – 2910 | NUM  | MMDDCCYY.  |
| RDS Termination Date (occurrence 1)  | 8      | 2911 – 2918 | NUM  | MMDDCCYY.  |
| RDS Coverage Period (occurrence 2)   | 16     | 2919 – 2934 | NUM  | See comments for the 1 <sup>st</sup> occurrence. |
| RDS Coverage Period (occurrence 3)   | 16     | 2935 – 2950 | NUM  | See comments for the 1 <sup>st</sup> occurrence. |

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| <b>Data Field</b>                                       | <b>Length</b> | <b>Position</b> | <b>Type</b> | <b>Comments</b>  |
|---|---------------|-----------------|-------------|--|
| RDS Coverage Period (occurrence 4)                      | 16            | 2951 – 2966     | NUM         | See comments for the 1 <sup>st</sup> occurrence.                   |
| RDS Coverage Period (occurrence 5)                      | 16            | 2967 – 2982     | NUM         | See comments for the 1 <sup>st</sup> occurrence.                   |
| Filler  | 1             | 2983            | CHAR        | Spaces.  |
| <b>Part D Eligibility Dates (5 occurrences)</b>         |               |                 |             |  |
| Part D Eligibility Start Date (occurrence 1)            | 8             | 2984 – 2991     | NUM         | MMDDCCYY.  |
| Part D Eligibility Termination Date (occurrence 1)      | 8             | 2992 – 2999     | NUM         | MMDDCCYY.  |
| Part D Eligibility Dates (occurrence 2)                 | 16            | 3000 – 3015     | NUM         | See comments for the 1 <sup>st</sup> occurrence.                   |
| Part D Eligibility Dates (occurrence 3)                 | 16            | 3016 – 3031     | NUM         | See comments for the 1 <sup>st</sup> occurrence.                   |
| Part D Eligibility Dates (occurrence 4)                 | 16            | 3032 – 3047     | NUM         | See comments for the 1 <sup>st</sup> occurrence.                   |
| Part D Eligibility Dates (occurrence 5)                 | 16            | 3048 – 3063     | NUM         | See comments for the 1 <sup>st</sup> occurrence.                   |
| <b>Beneficiary Subsidy Information (10 occurrences)</b> |               |                 |             |  |
| Subsidy Level (occurrence 1)                            | 3             | 3064 – 3066     | NUM         | ‘100’, ‘075’, ‘050’, or ‘025’.                                     |
| LIS DEEM Source Code (occurrence 1)                     | 2             | 3067 – 3068     | CHAR        | ‘01’, ‘02’, ‘03’, ‘04’, ‘05’, ‘06’, ‘SS’ or <ST> valid state code. |
| Beneficiary Subsidy Information (occurrence 2)          | 5             | 3069 – 3073     | Mixed       | See comments for the 1 <sup>st</sup> occurrence.                   |
| Beneficiary Subsidy Information (occurrence 3)          | 5             | 3074 – 3078     | Mixed       | See comments for the 1 <sup>st</sup> occurrence.                   |
| Beneficiary Subsidy Information (occurrence 4)          | 5             | 3079 – 3083     | Mixed       | See comments for the 1 <sup>st</sup> occurrence.                   |
| Beneficiary Subsidy Information (occurrence 5)          | 5             | 3084 – 3088     | Mixed       | See comments for the 1 <sup>st</sup> occurrence.                   |
| Beneficiary Subsidy Information (occurrence 6)          | 5             | 3089 – 3093     | Mixed       | See comments for the 1 <sup>st</sup> occurrence.                   |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| Data Field   | Length | Position    | Type  | Comments   |
|--|--------|-------------|-------|--|
| Beneficiary Subsidy Information (occurrence 7)   | 5      | 3094 – 3098 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Beneficiary Subsidy Information (occurrence 8)   | 5      | 3099 – 3103 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Beneficiary Subsidy Information (occurrence 9)   | 5      | 3104 – 3108 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| Beneficiary Subsidy Information (occurrence 10)  | 5      | 3109 – 3113 | Mixed | See comments for the 1 <sup>st</sup> occurrence. |
| <b>Beneficiary ESRD Clinical Dialysis Dates occurrences 2 through 6 (refer to position 1980 for first occurrence).</b> |        |             |       |  |
| Beneficiary ESRD Clinical Dialysis Dates (occurrence 2)  | 16     | 3114 – 3129 | NUM   | See comments for the 1 <sup>st</sup> occurrence. |
| Beneficiary ESRD Clinical Dialysis Dates (occurrence 3)  | 16     | 3130 – 3145 | NUM   | See comments for the 1 <sup>st</sup> occurrence. |
| Beneficiary ESRD Clinical Dialysis Dates (occurrence 4)  | 16     | 3146 – 3161 | NUM   | See comments for the 1 <sup>st</sup> occurrence. |
| Beneficiary ESRD Clinical Dialysis Dates (occurrence 5)  | 16     | 3162 – 3177 | NUM   | See comments for the 1 <sup>st</sup> occurrence. |
| Beneficiary ESRD Clinical Dialysis Dates (occurrence 6)  | 16     | 3178 – 3193 | NUM   | See comments for the 1 <sup>st</sup> occurrence. |
| Filler   | 1      | 3194 – 3194 | CHAR  | Spaces.  |
| MMP Opt Out Indicator  | 1      | 3195 – 3195 | CHAR  | 'Y', 'N', or a space.                            |
| <b>Medicare Plan Ineligibility Due to Incarceration Periods (Occurrences two through 10).</b>                          |        |             |       |  |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| <b>Data Field</b>   | <b>Length</b> | <b>Position</b> | <b>Type</b> | <b>Comments</b>                                  |
|---|---------------|-----------------|-------------|--|
| Medicare Plan Ineligibility Due to Incarceration Period (occurrence 2)  | 16            | 3196 – 3211     | NUM         | See comments for the 1 <sup>st</sup> occurrence. |
| Medicare Plan Ineligibility Due to Incarceration Period (occurrence 3)  | 16            | 3212 – 3227     | NUM         | See comments for the 1 <sup>st</sup> occurrence. |
| Medicare Plan Ineligibility Due to Incarceration Period (occurrence 4)  | 16            | 3228 – 3243     | NUM         | See comments for the 1 <sup>st</sup> occurrence. |
| Medicare Plan Ineligibility Due to Incarceration Period (occurrence 5)  | 16            | 3244-3259       | NUM         | See comments for the 1 <sup>st</sup> occurrence. |
| Medicare Plan Ineligibility Due to Incarceration Period (occurrence 6)  | 16            | 3260 – 3275     | NUM         | See comments for the 1 <sup>st</sup> occurrence. |
| Medicare Plan Ineligibility Due to Incarceration Period (occurrence 7)  | 16            | 3276 – 3291     | NUM         | See comments for the 1 <sup>st</sup> occurrence. |
| Medicare Plan Ineligibility Due to Incarceration Period (occurrence 8)  | 16            | 3292-3307       | NUM         | See comments for the 1 <sup>st</sup> occurrence. |
| Medicare Plan Ineligibility Due to Incarceration Period (occurrence 9)  | 16            | 3308-3323       | NUM         | See comments for the 1 <sup>st</sup> occurrence. |
| Medicare Plan Ineligibility Due to Incarceration Period (occurrence 10) | 16            | 3324-3339       | NUM         | See comments for the 1 <sup>st</sup> occurrence. |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| Data Field   | Length | Position  | Type | Comments   |
|--|--------|-----------|------|--|
| <p><b>Medicare Plan Ineligibility Due to Not Lawful Presence Periods (up to 10 occurrences).</b></p> <p><b>Note: Until MAPD2793 (Adding Plan Ineligibility Periods Due To Not Lawful Presence) is implemented, positions 3340-3499 will be filled with spaces.</b></p> |        |           |      |  |
| Medicare Plan Ineligibility Due to Not Lawful Presence Start Date (occurrence 1)   | 8      | 3340-3347 | NUM  | MMDDCCYY.  |
| Medicare Plan Ineligibility Due to Not Lawful Presence End Date (occurrence 1)   | 8      | 3348-3355 | NUM  | MMDDCCYY.  |
| Medicare Plan Ineligibility Due to Not Lawful Presence Period (occurrence 2)   | 16     | 3356-3371 | NUM  | See comments for the 1 <sup>st</sup> occurrence. |
| Medicare Plan Ineligibility Due to Not Lawful Presence Period (occurrence 3)   | 16     | 3372-3387 | NUM  | See comments for the 1 <sup>st</sup> occurrence. |
| Medicare Plan Ineligibility Due to Not Lawful Presence Period (occurrence 4)   | 16     | 3388-3403 | NUM  | See comments for the 1 <sup>st</sup> occurrence. |
| Medicare Plan Ineligibility Due to Not Lawful Presence Period (occurrence 5)   | 16     | 3404-3419 | NUM  | See comments for the 1 <sup>st</sup> occurrence. |
| Medicare Plan Ineligibility Due to Not Lawful Presence Period (occurrence 6)   | 16     | 3420-3435 | NUM  | See comments for the 1 <sup>st</sup> occurrence. |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| Data Field  | Length | Position    | Type        | Comments   |
|---|--------|-------------|-------------|--|
| Medicare Plan Ineligibility Due to Not Lawful Presence Period (occurrence 7)  | 16     | 3436-3451   | NUM         | See comments for the 1 <sup>st</sup> occurrence.   |
| Medicare Plan Ineligibility Due to Not Lawful Presence Period (occurrence 8)  | 16     | 3452-3467   | NUM         | See comments for the 1 <sup>st</sup> occurrence.   |
| Medicare Plan Ineligibility Due to Not Lawful Presence Period (occurrence 9)  | 16     | 3468-3483   | NUM         | See comments for the 1 <sup>st</sup> occurrence.   |
| Medicare Plan Ineligibility Due to Not Lawful Presence Period (occurrence 10) | 16     | 3484-3499   | NUM         | See comments for the 1 <sup>st</sup> occurrence.   |
| <b>Beneficiary MBI (Six occurrences)</b>                                      | 222    | 3500 – 3721 | Combination | Up to six occurrences listed in descending order by the date the occurrence was added to the beneficiary's record.   |
| Beneficiary's MBI (occurrence 1)  | 11     | 3500 – 3510 | CHAR        | The MBI from the beneficiary's most recent Beneficiary MBI period. The value is a system-generated identifier used by CMS to uniquely identify the beneficiary in the Medicare database. |
| Beneficiary's MBI Effective Date (occurrence 1)                               | 8      | 3511 – 3518 | NUM         | The Effective Date of the beneficiary's most recent Beneficiary MBI period. The format is MMDDCCYY.  |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| Data Field   | Length | Position    | Type | Comments   |
|--|--------|-------------|------|--|
| Beneficiary's MBI Effective Reason Code (occurrence 1) | 5      | 3519 – 3523 | CHAR | <p>The Effective Reason Code from the beneficiary's most recent Beneficiary MBI period. The value indicates the reason a MBI was assigned to the beneficiary. The valid values are the following.</p> <ul style="list-style-type: none"> <li>• 'A' (Accretion); and</li> <li>• 'I' (Initial bulk MBI assignment);</li> <li>• 'BA' (Special authorized);</li> <li>• 'BB' (Breach);</li> <li>• 'BP' (Provider issue);</li> <li>• 'BR' (Religious/cultural);</li> <li>• 'BT' (Medical/Identity theft);</li> <li>• 'BZ' (Other);</li> <li>• 'CA' (Special authorized);</li> <li>• 'CB' (CMS breach);</li> <li>• 'CE' (Entitlement and casework issues);</li> <li>• 'CF' (Confirmed fraud);</li> <li>• 'CT' (Medical/Identity theft); and</li> <li>• 'CZ' (Other).</li> </ul> |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| Data Field                                | Length | Position    | Type | Comments  |
|---|--------|-------------|------|---|
| Beneficiary's MBI End Date (occurrence 1) | 8      | 3524 – 3531 | NUM  | <p>The End Date of the beneficiary's most recent Beneficiary MBI period. The format is MMDDCCYY. The valid values are the following.</p> <ul style="list-style-type: none"> <li>• The field is populated with the End Date from the beneficiary's record, if a date exists; or</li> <li>• The field is filled with nines, if no value exists for the End Date in the beneficiary's record.</li> </ul> |

Medicare Beneficiary Database Suite of Systems (MBDSS)

| Data Field                                       | Length | Position    | Type        | Comments   |
|--|--------|-------------|-------------|--|
| Beneficiary's MBI End Reason Code (occurrence 1) | 5      | 3532 – 3536 | CHAR        | <p>The End Reason Code from the beneficiary's most recent Beneficiary MBI period. The value indicates the reason a MBI was deactivated for the beneficiary. The valid values are the following.</p> <ul style="list-style-type: none"> <li>• 'X' (Cross-reference merge);</li> <li>• 'BA' (Special authorized);</li> <li>• 'BB' (Breach);</li> <li>• 'BP' (Provider issue);</li> <li>• 'BR' (Religious/cultural);</li> <li>• 'BT' (Medical/Identity theft);</li> <li>• 'BZ' (Other);</li> <li>• 'CA' (Special authorized);</li> <li>• 'CB' (CMS breach);</li> <li>• 'CE' (Entitlement and casework issues);</li> <li>• 'CF' (Confirmed fraud);</li> <li>• 'CT' (Medical/Identity theft); and</li> <li>• 'CZ' (Other).</li> </ul> |
| Beneficiary MBI (occurrence 2)                   | 37     | 3537 – 3573 | Combination | The previous Beneficiary MBI period, if any, that is associated with the beneficiary. The occurrence is populated using the same rules as in the first occurrence.   |
| Beneficiary MBI (occurrence 3)                   | 37     | 3574 – 3610 | Combination | The second previous Beneficiary MBI period, if any, that is associated with the beneficiary. The occurrence is populated using the same rules as in the first occurrence.  |

| Data Field                     | Length | Position    | Type        | Comments  |
|--------------------------------|--------|-------------|-------------|---|
| Beneficiary MBI (occurrence 4) | 37     | 3611 – 3647 | Combination | The third previous Beneficiary MBI period, if any, that is associated with the beneficiary. The occurrence is populated using the same rules as in the first occurrence.  |
| Beneficiary MBI (occurrence 5) | 37     | 3648 – 3684 | Combination | The fourth previous Beneficiary MBI period, if any, that is associated with the beneficiary. The occurrence is populated using the same rules as in the first occurrence. |
| Beneficiary MBI (occurrence 6) | 37     | 3685 – 3721 | Combination | The fifth previous Beneficiary MBI period, if any, that is associated with the beneficiary. The occurrence is populated using the same rules as in the first occurrence.  |
| Filler                         | 279    | 3722 – 4000 | CHAR        | Spaces.   |

**Table 10: CMS-to-Territory Response File – Trailer Record**

| Data Field          | Length | Position  | Type | Comments    |
|---------------------|--------|-----------|------|-------------|
| Trailer Code        | 8      | 1 – 8     | CHAR | ‘MMATBQRT’. |
| Detail Record Count | 9      | 9 – 17    | NUM  | No comments |
| Filler              | 3983   | 18 – 4000 | CHAR | Spaces.     |

## 6.2.5. Communication Methods

This section describes communication methods used by the interface as well as error recovery.

### 6.2.5.1. Interface Initiation

This process is automated and a part of the daily Tivoli Work Scheduler (TWS) schedule. Database updates cause the MBDSS to insert beneficiary-specific triggers into a system table. A daily job converts these triggers into records that conform to the layout described above. One run will create responses for all outstanding query files.

### **6.2.5.2. Flow Control**

The response file is created in the Oracle Medicare Beneficiary Database Warehouse (OMBDW) mid-tier environment and transferred to the mainframe. The CMS EFT process sweeps the file and sends it to the state/territory.

CMS/partner will notify us in the event of a transmission failure. There is also a daily EFT transmissions report sent from the CMS CITIC contractor to the maintainers.

If there are any problems creating the file, the process should be restarted and it will resume where the error occurred. Please refer to the APCSS production control documentation for additional recovery details.

The APCSS documentation provides details on exchange related jobs, processes, file names, error codes, and handling procedures.

### **6.2.6. Security Requirements**

Please see section 5.5.

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## **7. QUALIFICATION METHODS**

Demonstration: The TBQ Query-Response process has been in production since 2008.

Testing: Prior to each process change:

- Developers perform unit testing.
- The maintenance contractor performs preliminary regression testing and integration testing.
- Independent testing contractors conduct thorough system and integration testing.

Inspection: Prior to releasing the first new file after a process change, the schedules are held and the maintenance contractor performs manual validation checks.

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## **8. GLOSSARY**

None.

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## **9. ACRONYMS**

The following acronyms are used in this document.

**Table 11: Acronyms**

| Acronyms     | Definition  |
|--------------|---|
| <b>APCSS</b> | Automated Production Control & Scheduling System            |
| <b>API</b>   | Application Programmable Interface                          |
| <b>BEQ</b>   | Batch Eligibility Query                                     |
| <b>CHAR</b>  | Character   |
| <b>CITIC</b> | Consolidated Information Technology Infrastructure Contract |
| <b>CME</b>   | CMS Entitlement, Eligibility and Enrollment                 |
| <b>CMS</b>   | Centers for Medicare & Medicaid Services                    |
| <b>CR</b>    | Change Request  |
| <b>DSN</b>   | Data Set name   |
| <b>EFT</b>   | Electronic Funds Transfer                                   |
| <b>ESRD</b>  | End Stage Renal Disease                                     |
| <b>FMT</b>   | Format  |
| <b>GTL</b>   | Government Task Lead  |
| <b>ICD</b>   | Interface Control Document                                  |
| <b>ID</b>    | Identification or Identifier                                |
| <b>LEN</b>   | Length  |
| <b>LIS</b>   | Low-Income Subsidy  |
| <b>MA</b>    | Medicare Advantage  |
| <b>MAPD</b>  | Medicare Advantage Prescription Drug                        |
| <b>MDCN</b>  | Medicare Data Communications Network                        |
| <b>MBD</b>   | Medicare Beneficiary Database                               |
| <b>MBDSS</b> | Medicare Beneficiary Database Suite of Systems              |
| <b>MBI</b>   | Medicare Beneficiary Identifier                             |
| <b>MDCN</b>  | Medicare Data Communications Network                        |
| <b>MMA</b>   | Medicare Modernization Act                                  |
| <b>MMP</b>   | Medicare-Medicaid Plan                                      |
| <b>MPI</b>   | Medicare Provider Inventory                                 |
| <b>N/A</b>   | Not Applicable  |
| <b>NGC</b>   | Northrop Grumman Corporation                                |
| <b>NUM</b>   | Numeric   |
| <b>OMBDW</b> | Oracle MBD Warehouse  |
| <b>OMM</b>   | Operations & Maintenance Manual                             |
| <b>PBP</b>   | Plan Benefit Package  |
| <b>RDS</b>   | Retiree Drug Subsidy  |
| <b>SEQ</b>   | Sequential  |

## Medicare Beneficiary Database Suite of Systems (MBDSS)

| Acronyms     | Definition                  |
|--------------|-----------------------------|
| <b>SSN</b>   | Social Security Number      |
| <b>STRUC</b> | Structure                   |
| <b>TBQ</b>   | Territory Beneficiary Query |
| <b>TWS</b>   | Tivoli Work Scheduler       |
| <b>VOL</b>   | Volume                      |
| <b>ZIP</b>   | Zone Improvement Plan       |

## 10. APPENDIX A

If the incoming file fails any of the validation tests, a rejection email will be sent to the state/territory. A template of the email text is as follows:

On *<Date/Time of file arrival >* a TBQ file arrived at CMS and was rejected. The reason for rejection was: *<Rejection Reason>*.

The Header Record of this file was:

**<Header Record>**

Please correct the error and retransmit the file.

If the incoming file passes all validation tests, an acceptance email will be sent to the state/territory. A template of the email text is as follows:

On *<Date/Time of file arrival >* a TBQ file arrived at CMS and was accepted for processing.

The Header Record of this file was:

**<Header Record>**

The Trailer Record of this file was:

**<Trailer Record>**

Total input records : nnn,nnn,nnn

Matching records count : nnn,nnn,nnn

Unmatched/Rejected records count : nnn,nnn,nnn

If you do not wish to receive this email, please reply indicating your request to be excluded.