



CENTER FOR DRUG AND HEALTH PLAN CHOICE

DATE: April 28, 2009

TO: All Part D Sponsors

FROM: Cynthia G. Tudor, Ph.D., Director
Medicare Drug Benefit and C & D Data Group

SUBJECT: Distribution of New Long-Term Institutionalized Resident Report

As discussed in the January 13, 2009 memo entitled “Long-Term Institutionalized Resident Report,” CMS will begin sending Part D sponsors a new Long-Term Institutionalized (LTI) Resident Report twice a year starting in 2009. The first 2009 report will be distributed on **Friday, May 15, 2009**. CMS intends to distribute the second 2009 report in the fall of 2009.

CMS expects that Part D sponsors will use this report to help ensure that all of their enrollees residing in long-term care (LTC) facilities have convenient access to a network LTC pharmacy and to assist with LTC pharmacy contracting efforts. While this report may also assist with preventing Part D payment for drugs covered by Medicare Part A, it is not the intended use of this report.

Information in this report will be obtained from the Minimum Data Set (MDS) of nursing home assessments. This report will contain data on which enrollees are institutionalized as well as the names and addresses of the particular LTC facilities in which those beneficiaries reside. Specifically, the list of beneficiaries will include those who are LTI residents as of July and January of each year and who have a reported length of stay over 90 days. This report will not replace or supplement any BAE documentation and should not be used to make determinations for a beneficiary’s enrollment status.

CMS will distribute the LTI Resident Report to each Part D sponsor via the secure CMS Enterprise File Transfer (EFT) process that your organization uses to communicate beneficiary-specific information to CMS, such as enrollment files. You will retrieve this report using your existing Gentran or Connect:Direct service. If your organization utilizes the services of a 3rd party vendor for Gentran or Connect:Direct access, please notify them that you will be receiving this new report so that, if you desire, they can retrieve the report on your behalf.

Note: Your organization will only receive an LTI Resident Report if you have LTI enrollees.

Please refer to **Appendix A** for the data layout specifications for the LTI Resident Report.

The production LTI Resident Report will use the following naming conventions:

Gentran Mailbox Users: P.Rcccc.LTCRPT.Dyymmdd.Thhmsst.pn

Connect:Direct Users: site-HLQ.Rcccc.LTCRPT.Dyymmdd.Thhmsst

Code Key:

cccc - Contract Number (e.g., S0000)

pn - Sequentially Assigned Number

site-HLQ - A high-level qualifier currently used by the contract number to receive files.

If you have any questions concerning this memorandum, please send an e-mail to PartDMetrics@cms.hhs.gov and include "LTI Resident Report" in the subject line.

For any technical inquiries related to Gentran or Connect:Direct, please contact the MMA Help Desk at 1-800-927-8069 or mmahelp@cms.hhs.gov.

APPENDIX A: Long Term Institutionalized Resident Report Data Layout Specifications

The Long Term Institutionalized (LTI) Resident Report provides Part D sponsors a list of their beneficiaries who are LTI residents during July and January of each year. This report contains basic information on the beneficiaries and their institutions (Skilled Nursing Home or Nursing Home). The report is provided in a fixed-length text format and the record layout is described below.

Part D Beneficiaries/Long Term Institutionalized Residents: Record Layout			
Field Name	Field Type	Field Length	Field Description
Part D Contract Number	CHAR	5	Part D Contract Number associated with the resident during the month of the last nursing home assessment date. (Source: CME)
Part D Plan Number	CHAR	3	Part D Plan Number associated with the resident during the month of the last nursing home assessment date. (Source: CME)
Part D Plan Name	CHAR	50	Part D Plan Name associated with the resident during the month of the last nursing home assessment date. (Source: MARx)
Last Name	CHAR	24	Beneficiary Last Name (Source: EDB)
First Name	CHAR	15	Beneficiary First Name (Source: EDB)
Health Insurance Claim Number (HIC) (External format)	CHAR	12	Health Insurance Claim Number associated with the resident. (External format) (Source: Fu Associates matching algorithm)
Date of Birth	DATE	8	Beneficiary Date of Birth (Source: EDB) Format CCYYMMDD
Gender	CHAR	1	Beneficiary Gender (Source: EDB) 1 = Male 2 = Female 0 = Unknown
Nursing Home Length of Stay	CHAR	6	Nursing Home Length of Stay in Days (0-999999) at the time of the last Nursing Home assessment. (Source: Derived)
Nursing Home Admission Date	DATE	8	Admission date associated with the last assessment for the resident. (Source: Derived) Format CCYYMMDD
Last Nursing Home Assessment Date	DATE	8	Target date of last assessment for the resident. (Source: MDS Unload). Format CCYYMMDD
Part A Indicator	CHAR	1	Reason for assessment (AA8B) associated with the last assessment for the resident. (Source: Derived) 0=No 1=Yes

Part D Beneficiaries/Long Term Institutionalized Residents: Record Layout

Field Name	Field Type	Field Length	Field Description
Nursing Home Name	CHAR	50	Name of Nursing Home associated with last assessment for the resident. (Source: MDC Facility File Unload)
Medicare Provider ID	CHAR	12	Medicare Provider ID of Nursing Home associated with last assessment for the resident. (Source: MDS Facility File Unload)
Provider Telephone Number	CHAR	13	Telephone Number of Nursing Home associated with last assessment for the resident. (Source: MDS Facility File Unload)
Provider Address	CHAR	50	Address of Nursing Home associated with last assessment for the resident. (Source: MDS Facility File Unload)
Provider City	CHAR	20	City of Nursing Home associated with last assessment for the resident. (Source: MDS Facility File Unload)
Provider State Code	CHAR	2	State Code of Nursing Home associated with last assessment for the resident. (Source: MDS Facility File Unload)
Provider Zip Code	CHAR	11	Zip Code of Nursing Home associated with last assessment for the resident. (Source: MDS Facility File Unload)