

2010 Part D Symposium



The Medicare Current Beneficiary Survey and New Part D Data



What is the MCBS?

- ◆ It is a longitudinal survey of a nationally-representative sample of Medicare enrollees.
- ◆ It is conducted by CMS (through a contract with Westat).
- ◆ It collects information on beneficiary health status, health care use and financing, and characteristics (social, economic, demographic, etc.).
- ◆ Data are available for 1992-2006.

The MCBS Helps Us:

- Understand beneficiary experiences with the Medicare program
- Understand use and costs of non-covered services
- Measure the financial burden of health care among the Medicare population
- Measure beneficiary knowledge of the Medicare program and health care issue
- Capture other sources of health insurance besides Medicare and measure their influence on health care utilization

MCBS Interviews

Three interviews per year.

- Community ~ face to face or proxy
- Facility ~ by MDS and facility personnel

Conducted using Computer Assisted Personal Interview (CAPI).

Data Collected in the MCBS

Demographic

- Age, gender, race, Hispanic Ethnicity
- Marital status
- Household composition
- Education
- Veteran status
- Income
- Living Arrangement

Data Collected in the MCBS (cont.)

Total use of health care

- Medicare covered services (including preventative services)
- Non-covered services (e.g. drugs covered by third party payers, nursing home care)

Total spending for health care, including

- Medicare and Medicaid
- Private insurance
- Out of pocket
- etc.

Data Collected in the MCBS (cont.)

Health insurance coverage

- Employer sponsored PHI
- Individually purchased PHI (Medigap)
- Medicaid
- Other public (VA, Pace, etc..)

Satisfaction with care

- Satisfaction with drug coverage
- Medication compliance
- Reasons for Non-compliance
- Cost coping strategies

Data Collected in the MCBS (cont.)

Access to care

Usual source of care

Health Status and Functioning

- Chronic Conditions
- Activity Limitation
- Medication Compliance

Knowledge and Information Needs

- Knowledge of Medicare
- Knowledge of Part D Program
- Sources of Information

Data Collected in the MCBS (cont.)

Prescription Drug Plans

- Experiences with Plans
- Difficulties Obtaining Drugs
- Experience with Coverage Decisions

New administrative data in 2006

Monthly Part D enrollment flags

- PDP, MA-PD
- No contract or plan IDs

Monthly low income subsidy indicators

- 0%/25%/50%/75%/100% premium subsidy

Monthly Part D capitation payment

Monthly retiree drug subsidy flags

Monthly creditable coverage flags (Y/N)

- Tricare or VA or federal retiree or active worker
- Access to Care files only

Part D Prescription Drug Event (PDE) Data in the MCBS

Starting in 2006 the MCBS is augmented with information from Medicare PDE Data

These data provide a better picture of utilization and spending than survey reports used in earlier editions of the data

Uses a complex matching algorithm

Comparisons to survey only reports of drug use requires some adjustments

Matching to MCBS: Pre-Processing

Assign First Databank Brand Name, Generic Name and Unique Drug Identifier Code to survey events

- Raw Prescribed Medicine Event (PME) data are read in and an attempt is made to assign a Brand Name, Generic Name and Unique Drug Identifier Code to each event based on information reported about the drug product.
- Where this cannot be done programmatically, matches are performed manually by CMS staff using a lookup table from the First Databank National Drug Data File from April of the year following the survey.

Assign Survey Round Number to Prescription Drug Event (PDE) Records:

- Specific beneficiary MCBS round numbers are associated with each PDE event based on comparison of interview dates to prescription fill dates.

Matching to MCBS: PME to PDE

Attempts are made to match PME and PDE events using a series of different criteria, each of which is less rigid in its requirement than the previous.

The first set requires a match within the survey round and either a match on:

- Brand Name & Unique Drug Identifier Code
- Brand Name & Strength
- Generic Name & Unique Drug Identifier Code
- Generic Name & Strength
- Brand Name
- Generic Name

These steps are repeated with the survey round match relaxed with the proviso that the MCBS event has to lag the PDE event.

Events that remain unmatched are processed manually by CMS staff.

Quality assurance checks are run on all final matches.

Matching to MCBS: Final Processing

Final processing is performed to:

- Move PDE reported insulin administration supplies to a separate RIC file
- Replace survey reported cost information with PDE reported cost information
- Add First Databank drug information
- Split final round (Round 47) events between 2006 and 2007
 - For non-Part D beneficiaries, based on proportion of round days in 2006 vs. 2007.
 - For Part D beneficiaries, all unmatched round 47 survey only events moved to 2007.

Matching to MCBS: Elements Added

First Databank Information:

- First Databank brand name
- First Databank generic name
- First Databank strength
- First Databank route

PDE Information:

- NDC Code
- Service Date
- Quantity
- Days Supplied
- PDE Match Indicator
 - 1=Survey Reported Event
 - 2=PDE Only Event
 - 3=Survey Reported Event matched to PDE

Analysis of Underreporting of Drug Events

Compared reported drug events with PDE-only (unreported)

Identified non-institutionalized Part D enrollees with January enrollment

Went to file of drug events (RICPME)

$\text{PDE-only \$} / \text{total \$} = \text{proportion unreported}$

Separate analyses for total drug costs and out-of-pocket drug costs

Drug cost underreporting by LIS status

	Total costs	Out-of-pocket
All Part D	16%	12%
Non-LIS	13%	13%
LIS	18%	9%

Drug cost underreporting by therapeutic class

	Total costs	Out-of-pocket
Analgesics	23%	19%
EENT preparations	24%	19%
Cardiac drugs	12%	11%
Psychotherapeutic drugs	17%	12%

Adjusting for Underreporting

Adjustment should be applied to costs of non-Part D enrollees only

Apply adjustment based on non-LIS Part D respondents

If enrolled in Part D part of the year, adjust costs for portion of the year not enrolled

MCBS doesn't collect survey drug data for institutionalized beneficiaries

Summary

- The MCBS is a premier data source for studying the Medicare beneficiary population
- The addition of Part D data allows us to study prescription drug use among beneficiaries in more detail and with greater precision than has been possible before