

CMS 2008 Basic Stand Alone (BSA) DME Line Items Public Use File (PUF) **Frequently Asked Questions (FAQ)**

1. What is the *CMS 2008 BSA DME Line Items PUF*?

The *CMS 2008 BSA DME Line Items PUF* is a free downloadable file containing a subset of the information contained on Durable Medical Equipment (DME) claims for durable medical equipment, prosthetics, orthotics and supplies provided to a 5% sample of 2008 Medicare beneficiaries. Each of the 5,105,237 records in the file pertains to one line item of a DME claim. Each record includes:

1. Gender of the beneficiary;
2. Age of the beneficiary at the end of 2008, reported as (1) under 65 years of age; (2) 65 to 69; (3) 70 to 74; (4) 75 to 79; (5) 80 to 84; and (6) 85 and older;
3. Primary diagnosis code for the line item (defined below);
4. HCPCS code for the line item (also defined below);
5. Number of services associated with the line item;
6. Rounded Medicare payment for the line item.

2. How was this PUF created?

The *CMS 2008 BSA DME Line Items PUF* originates from a disjoint 5% random sample of beneficiaries from the 100% Beneficiary Summary File for 2008. To exclude any overlap with the beneficiaries in the existing 5% CMS research sample,¹ the beneficiaries in that other sample were excluded, and a 5-in-95 random draw was made of the remaining 95% of beneficiaries. All DME Line Items for the selected 5% of beneficiaries were then included in the sample from which the *CMS 2008 BSA DME Line Items PUF* was developed.

The selected DME line items were subjected to a thorough de-identification process. The methods used to protect the identity of beneficiaries are described in the answer to the next question.

3. What has been done to protect the privacy of Medicare beneficiaries?

Of paramount importance in the release of the PUF is the protection of beneficiary confidentiality. To that end, all directly identifiable information has been removed in accordance with the HIPAA Privacy Rules.

Other important steps were taken:

¹ http://www.resdac.org/tools/TBs/TN-011_How5percentMedicarefilescreated_508.pdf

- Only a small subset of possible variables was selected for inclusion in the file. This reduced the possible information that could be used to identify the beneficiaries included in the new 5% sample.
- For the variables selected for inclusion, categorization was used to protect identities. For example, in place of date of birth or current age in years, the file was created with age categorized into six intervals: (1) under 65 years of age; (2) 65 to 69; (3) 70 to 74; (4) 75 to 79; (5) 80 to 84; and (6) 85 and older. This categorization allows researchers to differentiate patterns in other data (e.g., in the frequency of a particular diagnosis at hospital admission) between claims of younger and older beneficiaries but not to use age or date of birth as a highly identifying variable.
- The final protection was provided by excluding about 5% of records from the final PUF, those for which the combination of values for all six variables in the file were extremely uncommon in the Medicare population. No combination that occurred for fewer than 11 beneficiaries in the full Medicare population was allowed into the final PUF. This criterion tended to exclude line items with uncommon HCPCS codes and uncommon primary diagnosis codes. However, the criterion also assured that no record in the PUF could be linked to a particular beneficiary no matter how much information a user knew about any beneficiary.

4. How was provider confidentiality protected?

CMS 2008 BSA DME Line Items PUF does not contain any information about individual providers. In order to ensure the confidentiality of solo practitioners/suppliers, all line items associated with solo practitioners were removed from the *CMS 2008 BSA DME Line Items PUF*. Such line items constitute a negligible percentage of the initial 5% sample.

5. Can you explain what the 3-digit ICD-9 primary diagnosis code (DME_LINE_ICD9_DGNS_CD) means?

DME_LINE_ICD9_DGNS_CD provides the first three digits of the ICD-9 CM primary diagnosis code on Medicare DME line items (for V codes the first three alphanumeric characters and for E codes the first 4 alphanumeric characters are provided). The original ICD-9-CM diagnosis codes are composed of codes up to five characters. DME_LINE_ICD9_DGNS_CD provides information on the heading of a category, whereas the fourth and/or fifth digits (those to the right of the decimal point in the ICD-9-CM diagnosis codes) provide greater detail. *CMS 2008 BSA DME Line Items PUF SAS Data Users Guide* also provides the descriptions of these 3-digit ICD-9 primary diagnosis codes.

6. Can you explain what the line service count variable (DME_LINE_SRVC_CNT) means?

DME_LINE_SRVC_CNT provides the count of the total number of services associated with the line item provided in the *CMS 2008 BSA DME Line Items PUF*. To learn more about this variable refer to http://www.resdac.org/ddvib/Files/SRVC_CNT.htm.

7. How is Medicare payment amount represented in the *CMS 2008 BSA DME Line Items PUF*?

Payments were rounded according to the following rules:

Payment Amount (\$)	Rounding Rule
0-100	Round to the nearest 10
100-1,000	Round to the nearest 50
1,000-5,000	Round to the nearest 1,000
5,000-10,000	Round to the nearest 5,000
Greater than 10,000	Round to the nearest 10,000

8. What data cleaning steps were performed to obtain the initial 5% DME sample?

The 5% random DME sample was cleaned by removing invalid HCPCS codes and denied line items. Other exclusions include the exclusion of solo practitioners/suppliers (see FAQ #4 above). De-identification procedures were then performed on the resulting initial 5% DME sample (see FAQ #3 above).

9. Can I know which line items belong to the same Medicare beneficiary?

The *CMS 2008 BSA DME Line Items PUF* does not allow users to link multiple DME line items on the file for those beneficiaries with more than one DME line item in 2008. The record identification field on the PUF contains a new series of random numbers generated just for the *CMS 2008 BSA DME Line Items PUF* and used to sort DME line items in a random order. Users wishing to work with a subsample of the line items on the file can use the record identifier to draw a random subset of records.

10. Can I know which line items belong to the same claim for a Medicare beneficiary?

A DME claim (for a beneficiary) might include more than one DME line items. However, the *CMS 2008 BSA DME Line Items PUF* does not allow users to link multiple DME line items for a single claim. Also, see FAQ #9 above.

11. How is the *CMS 2008 BSA DME Line Items PUF* different from the 5% CMS standard research sample?

There is no overlap in terms of beneficiaries between the 5% CMS standard research sample and the *CMS 2008 BSA DME Line Items PUF*. These two 5% samples are disjoint.

12. What are the limitations of the *CMS 2008 BSA DME Line Items PUF*?

The *CMS 2008 BSA DME Line Items PUF* is intended to give researchers a convenient initial look at data drawn from CMS DME claims. The file contains measures of demographic characteristics of beneficiaries, supplies purchased, primary diagnosis, number of services, and Medicare payment amount. In order to preserve confidentiality, suppression criteria have been applied to variables and line items on the initial file. Some variables are rounded or categorized. Researchers should read the General Documentation and the Data Dictionary and Codebook to determine the appropriateness of the PUF for addressing specific research questions.

13. How may I request additional data?

See the Files for Order section of the CMS Web site <http://www.cms.gov/home/rsds.asp>. This site lists available CMS data files, data file properties, information about data-use agreements, as well as ordering and payment information.

14. What is the plan for future data releases?

The *CMS 2008 BSA Inpatient Claims PUF* was released in February 2011. The *CMS 2008 BSA DME Line Items PUF* is released together with the *CMS 2008 BSA Prescription Drug Events PUF* and *CMS 2008 BSA Hospice Beneficiary PUF*. The current plan is to release additional 2008 Basic Stand Alone (BSA) PUFs in 2011. These PUFs will be based on some or all of the following files: Skilled Nursing Facility (SNF) claims, Outpatient claims, Physician/Supplier claims, and Home Health Agency claims.

15. How may I provide feedback on the *CMS 2008 BSA DME Line Items PUF*?

Questions and comments can be submitted to Research Data Assistance Center (<http://www.resdac.org/>) via resdac@umn.edu or 1-888-9RESDAC.