

MEDICARE CURRENT BENEFICIARY SURVEY (MCBS): DATA NOTE



Version Control Log

Date	Version	Revisions
09/13/2022	1.0	Initial version published.

DATA NOTE: MEDICARE PAYMENT AMOUNTS IN PRE-2021 MCBS COST SUPPLEMENT FILE DATA

Introduction

The purpose of this Data Note is to describe an issue identified with payment amounts in the Medicare Current Beneficiary Survey (MCBS) Cost and Use/Cost Supplement File¹ Limited Data Set (LDS) through data year 2020.

For more information about the MCBS Cost Supplement File LDS, please see the *Data User's Guide: Cost Supplement File* along with other data documentation available at <https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/MCBS/Codebooks>.

Overview

For a small percentage of event-level records in the MCBS Cost Supplement File LDS through data year 2020, there are payment amounts for both Medicare Fee-for-Service (FFS) and Medicare Advantage (MA) for a given event. This is not possible since medical events cannot be simultaneously covered by both Medicare FFS and MA.

This issue occurs when the beneficiary's type of Medicare coverage is misreported by the respondent during the survey interview and payments are subsequently misallocated to an inappropriate payer during the data editing and imputation process. Based on Medicare administrative data, the most common type of misreporting is when a respondent reports that the beneficiary has MA coverage when they do not. For example, for the 2019 Cost Supplement File, in approximately 80 percent of the problematic records (at the event level), the MA payment amount should be allocated to another payer; for the remaining 20 percent of the problematic records, the Medicare FFS payment amount should be allocated to another payer.

Scope

This issue affected both event-level segments and summary segments in the MCBS Cost Supplement File LDS through data year 2020. This issue will be corrected in all affected segments beginning with the 2021 MCBS Cost Supplement File LDS. Exhibit 1 lists the affected event-level segments and criteria for identifying the problematic records on those files.

¹ From 1992-2013, payer, cost, and utilization data on Medicare beneficiaries were released on the MCBS Cost and Use LDS. Following a contract transition in 2014, the MCBS LDS releases were renamed and reorganized from prior years; as such, beginning with 2015, these data are released on the MCBS Cost Supplement File.

Exhibit 1: Event-Level LDS Segments Affected by the Payment Misallocation Issue

Segment Name	Segment Abbreviation	Criteria
Dental Utilization Events	DUE	MCOHMO (Event provided by an MCO/HMO?) = 1 <i>AND</i>
Hearing Utilization Events	HUE	
Inpatient Hospital Events	IPE	AMTCARE (Amount paid by Medicare FFS) > 0 <i>AND</i>
Institutional Events	IUE	
Medical Provider Events	MPE	AMTMADV (Amount paid by Medicare MCO/HMO) > 0
Outpatient Hospital Events	OPE	
Vision Utilization Events	VUE	

Notes: MCO stands for Managed Care Organization. HMO stands for Health Maintenance Organization. The HUE and VUE segments were first released for data year 2019.

As the Service Summary (SS) and Person Summary (PS) segments released on the Cost Supplement File LDS summarize payer, cost, and utilization data from the event-level segments, these segments were also affected by this payment misallocation issue.

Impact

Overall, this issue affected a small percentage of event-level records on the MCBS LDS, and MCBS estimates are intended to represent the Medicare population as a whole rather than to provide an individual accounting of each Medicare beneficiary's payments. While this issue may result in a small bias toward MA payments, this bias should be within the standard errors for the summary segments' estimates.

For researchers conducting analysis at the event-level, the misallocation of Medicare FFS and MA payments may be more impactful, although reallocation of payments to other payers could also introduce bias. As such, for guidance on analyzing event-level payments across payers or other data-related questions, please email MCBS@cms.hhs.gov.