Center for Medicare & Medicaid Innovation
Bundled Payments for Care Improvement

Technical Aspects of Data Delivery and File Processing Webinar Transcript
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Please note: The transcript for this activity is based on the actual webinar recording. Minimal editorial/formatting changes have been made to the transcript text.

PAMELA PELIZZARI: Hello and thank you so much for joining us today. This is Pamela Pelizzari with the Center for Medicare and Medicaid Innovation and we're very excited that some of our technical contractors have helped to put together these webinars for you today. So today's speaker will be Buccaneer, a General Dynamics Company, and they'll be talking about technical aspects of the data that will be delivered to approved requesters from the Bundled Payments for Care Improvement Program. Just to put things into context, this is the first in a series of four webinars that are happening this week.

So today we have Technical Aspects of Data Delivery and File Processing, which is presented by Buccaneer and then we'll resume on Wednesday and have sessions on Wednesday, Thursday, and Friday of this week with ResDAC, the Research Data Assistance Center. Today I'd like to turn it over to Chris Alleman and Susie Joe to give their presentation and at the end we'll be taking questions through the chat feature. So you can submit these questions throughout the presentation if you'd prefer, but we won't be answering them until the end of the presentation today.

We'd also encourage you before you sign off to take the survey that you can access through the survey button at the bottom center of your screen. You can wait 'til the end. It will be there the whole time, but we'd love to get some feedback from you regarding what kind of learning needs you have surrounding this data. So I ask that Chris and Susie take it away.

CHRISTOPHER ALLEMAN: All right. Thank you for the introduction, Pamela, and hello, everyone. I'm Chris Alleman and I'm here today along with my counterpart, Susie Joe, on behalf of Buccaneer, a General Dynamics Company. As Pamela mentioned, in today's session Susie and I will be covering the technical aspects of the data delivery process as well as the details regarding processing of the files. But first we wanted to talk just briefly about who we are. Buccaneer is a wholly owned subsidiary of General Dynamics specializing in IT services.

Our expertise includes a wide-ranging set of IT disciplines that we've utilized for the support of entities such as the Centers for Medicare and Medicaid Services, the Department of Defense, and the Food and Drug Administration to name just a few. Our services span the complete system development life cycle or SDLC from project planning to requirements development and management through design and development into quality assurance, production control and help desk support. We hold the Chronic Condition Data Warehouse contract with CMS. This contract is widely known as the CCW in which we have a major focus and impact on health informatics and analytics.

So what we do, one of our primary responsibilities is to maintain the CCW environment, which consists of a relational database that houses CMS data. This consists of 100 percent data from 1999 forward and spans Medicare claims, enrollment, assessments, and Part D data as well as

Medicaid enrollment and services data. Our other responsibilities with the CCW contract include supporting CMS staff on various initiatives, constructing analytic data extracts for the research community, and providing training and support resources from the technical aspect for the various data users.

So what we're going to cover today, we're first going to talk about data delivery details and then we'll move into data content, file access, initial file processing, and help resources. So our first topic is data delivery. As of Friday, the majority of capacity planning emails have been sent out. However, there are a handful of individuals that are yet to be notified. We hope to [unint.] notification in the coming days. These capacity planning email notifications were sent to project contacts as well as ship-to recipients, those who will be receiving the data package. And the emails included DUA numbers, specific internal request IDs, and approved HRCs.

We'll share our contact information at the end of the presentation in the event you have questions about this or questions about any other technical item that you may think of after the session's ended. With the approved HRCs, there is a file that you can reference to determine the HRC sizes and that's available on the bundled payments learning and resources area. For those of you who have received email notification, this link has been recently updated so please take note of that. When you go to this learning resource area, there's also an overview and background on the initiative, frequently asked questions, and general resources like metadata, data dictionaries and so forth.

So receiving the data, there will be a data shipment. You will receive at least one USB hard drive. It's a 500 gig hard drive. So depending on the amount of data that's provided to you and the number of organizations you're working with, you may get multiple. That is a very small handful of recipients. Most people will get the data on one USB hard drive. That will come along with a cover letter. The project contacts were contacted when multiple ship-to recipients were listed in the original application. If you have any questions about that, you can contact the project contact and they can forward questions on to us.

These will be shipped to the recipient listed in the original application shipping information section delivered via FedEx on or around February 28th, 2012. And at that time we'll send out a second shipment confirmation email that will be distributed once your data package is actually shipped from our offices and that will include the password for the data files. So a couple of notes on receiving the data. If one ship-to recipient is listed to receive the data or multiple entities, all the HRCs will be shipped on, like I said, a single hard drive if the space allows. That will cover the majority of data packages that we send out.

And when the HRCs requested were duplicates, most have been re-categorized as re-use. So one thing you want to note is the data will be [unint.] will be shipped on a single hard drive if possible in separate requests. An example of that would be if you requested HRC1 for five different organizations, you'll receive only one copy of HRC1 data files. That will then be used to satisfy all five requests. The cover letters as well as the "read me" files that are included on the hard drive will spell out the details for each organization. Next we want to get into the data contents and I'll pass that over to Susie Joe.

SUSIE JOE: Thank you, Chris. In the next few slides we'll go over, this will give you a visual of what's on the hard drive. Okay. So when you receive your hard drive, you'll see one extract documentation folder. You'll see another folder labeled ResDUA where the number sign is the

number, the DUA number underscore REQ followed by a series of "Xs." The Xs represent the request number. If you are approved to receive multiple HRCs under one DUA, you will see one ResDUA folder. If you have multiple DUAs, then you will see multiple ResDUA folders.

We'll go over now what you'll receive within the extract documentation folder. Here you'll find the file layouts, the data dictionaries. The encryption instructions will be provided. You will also find a TIPS document and a shipping package insert. Inside the ResDUA folder you'll see the two yearly folders, 2008 and 2009. For each yearly folder you'll receive 25 self-decrypting archive files or SDAs. They are named according to this convention where extract is the extract file name followed by HRC number. This is your approved HRC number followed by the year, which will be 2008 or 2009 ending with a dot exe extension. SDAs are executable files.

In the next slide we'll go over an example using HRC 63 for 2009. Here you see the 25 SDAs. You may or may not see the dot exe extension depending on the setting options that you have on your computer. Twenty-five of the 24 SDAs are to claims files. Denominator files, you'll see as listed here as the fifth one down below the B carrier and DME files. You'll also receive a "read me" document for each yearly folder. You can find it on this slide towards the end, six from the bottom above the skilled nursing facility files. This is a plain text file. You can open it with no [unint.]. The "read me" document provides you with information about the SDA contents.

Another thing to note is if you are approved to receive multiple HRCs under one DUA, you'll see 25 SDAs for each of the HRCs but still only one "read me." You'll be receiving four types of institutional claims. They are inpatient hospital, skilled nursing facility, hospital outpatient, and home health agency. For each of these four institutional claim types, you'll be provided with these five files: base claim, revenue center claims, institutional occurrence codes, condition codes, and value codes. And there are two types of non-institutional claims. They are carrier and durable medical equipment. They'll be a base file and a line item file for carrier and a base and line item file for DME.

Okay. So now you have your hard drive and you can see all the SDAs for your approved HRCs. What do you do next? Each of the SDAs contains three files. They'll be a file transfer summary document, FTS. The FTS document contains information about the data extract. These are plain text files and can be opened with Notepad. In it you'll find information such as the number of columns in the data extract, number of rows, the [unint.] of the data file, and the size of the data file. You'll also receive a SAS program to read in your data file into SAS datasets. And then the data extract itself, that DAT file, this is a six [ph.] column [unint.] data file.

SDAs are compressed and encrypted and they must be decrypted and uncompressed prior to use. Decryption passwords will be sent electronically and separately from the data package. Buccaneer uses PGP software, which is compatible across all platforms. And again, please refer to the list of HRC sizes to determine necessary disk space and the URL was on slide 7.

Okay. So now I'll go over the process of what you do with the data that's on your hard drive. As Chris had mentioned previously, the space capacity on the hard drive is 500 gigabytes. You will do one of the two things, either decrypt and decompress directly on the hard drive or you can copy the SDAs to your target Windows platform and decrypt and decompress from there. The majority of you will have enough space on the USB hard drive to decrypt and decompress all your files. For those of you who may be receiving multiple HRCs, you may need to move SDAs off the hard drive before you decompress and decrypt.

Just to give you an idea of the expansion ratio for the SDAs, the average expansion ratio is approximately 9.3 to 1. So to determine if you have enough space, you times the total number of the total SDA size listed in that SDA list for your HRC and you times it by 9.3 and that will give you an estimated total sum of the [unint.] file sizes. So have your password handy and you [unint.] each SDA. Just double click on the SDA and you'll be prompted for your password. You enter the password and it will inflate the results. You should have three files, an FTS, a SAS and a DAT. So that's something you would want to verify when you open up your SDA. And you have to repeat this for each SDA.

Okay. So now you have your hard drive and you decrypt it and uncompress your data. You're ready to begin processing. You can join your claim files to the denominator file using DESY sort key. The DESY sort key is the beneficiary key. Use the variable claim number to join the claims within the same claim type and year. So if you want to join your line item files, your carrier line item files to your carrier base files, you want to join using claim number.

CHRISTOPHER ALLEMAN: All right. So we want to go over some of the help resources before we get into the Q & A session. If you have questions, like I had stated earlier, you can summit technical help requests and questions to cmsdata@vangent.com. We'd ask that you please reference "bundled payments" in the subject line and include the DUA number and the Request IDs just for easier location of your specific request information. And I think Pamela will jump back on in a little while and provide some more contact information for non-technical questions such as policy questions and so forth.

We wanted to go over a few questions that we're getting in. It looks like I've got a few here for you, Susie, so we'll start there. The first one is will the SAS reading programs use long or short column names or both? The data dictionaries provided on the [unint.] of my learning area contain both.

SUSIE JOE: Thank you, Chris. The SAS reading programs will use long column names.

CHRISTOPHER ALLEMAN: All right. The next one is will we be able to identify all providers such as facility and physician?

SUSIE JOE: Physician identifiers are encrypted. However, institutional provider numbers are not. Just one more note on that. I'm sorry. The physician identifiers are encrypted the same way across years. So you'll be able to follow the same physician, you just will not be able to identify who that physician is.

CHRISTOPHER ALLEMAN: All right. The next one is will a person always be in the same HRC in 2008 and 2009?

SUSIE JOE: Yes, they will. For example, if a person is in an HRC in either 2008 or 2009, they will be included. So if a person is in one HRC in 2008 and another HRC in 2009, that person will be included in both HRCs for both years.

CHRISTOPHER ALLEMAN: Okay. Great. And then in terms of the size of file after decryption, could you please tell us again the average expansion ratio of the files?

SUSIE JOE: 9.3 to 1 approximately.

CHRISTOPHER ALLEMAN: All right. Let's see. What else do we have here? We have the question is it too late to change the ship-to person and the custodian? I guess the answer to that is it's not too late, but we would need any updates to that information at least by the end of this week. After that, we will [inaud.] it to the...

PAMELA PELIZZARI: Chris, I'll jump in here. This is Pamela at the Center for Innovation. I guess for processing purposes at this point unless you have some extremely extenuating circumstance, we're not going to be able to change the ship-to person. You can add additional custodians though by adding a DUA Signature Addendum and if you have more questions about that, you can go ahead and get in contact with the Center for Innovation directly and that's at bundledpayments@cms.hhs.gov. We just, we can't really process too many changes in ship-to [inaud.] at this point.

CHRISTOPHER ALLEMAN: All right. Another question we have is can the data be imported into Excel? And we don't recommend that just because of the size. Excel can't really handle the size of these data files. So that answer is no. Some basic questions here, would the slide presentation be available? And the answer to that...

PAMELA PELIZZARI: Hi. This is Pamela at the Center for Innovation again. I can tell you that yes, both the slides as well as an audio file with all of this recorded and a transcript will be available on the internet before the data is delivered, but it does take us about a week to get that up. So I'll send you, however, and I believe I can push the web link to everyone through this format. But the slides are already available online on the ResDAC website and there should be a link from our website at the Center for Innovation to that website within the day. But I'll send you all to that link right now. It should pop up on your screen. So that's the Research Data Assistance Center. And if you have a question about where to find that, you can email us at bundledpayments@cms.hhs.gov.

CHRISTOPHER ALLEMAN: All right. Another question is where's the list of HRCs where we could estimate the size for disk space? And that again was on I believe slide 7. Let's see. Yes. And it's in the Bundled Payments Learning and Resources area. So if you... Let's see if we can go back there real quick just so that you can get that email address down or that URL down. It's http://innovations.cms.gov site. All right. And then we've got a couple of questions about what is a DUA number and what is an HRC? Pamela, did you want to take those?

PAMELA PELIZZARI: Sure, I can take those. So DUA stands for Data Use Agreement and that's the form that you had to fill out when you were applying for this data. And it's a form that governs the use of the data. So it's an agreement between you and CMS regarding what you'll be doing with the data. So everyone who's applied for data should have filled one of those out. And that number, we got another question. That number will be emailed to you. And I know some people have received a notification from CMS that says which regions they've been approved for, but it doesn't say what their DUA number is and you'll be receiving a separate email about that. So don't start worrying about that too soon.

The HRC stands for hospital referral cluster. So that's a geographical region. And again, anyone who applied for data [unint.] had to define which possible referral clusters they were requesting. So those would be things like Boston, Massachusetts and it includes several of the counties around Boston, Massachusetts. A definition of which counties are in every HRC is in the research request packet, which you had to fill out as part of this initiative. And that can be found

on our website if you still have questions about which county maps to which HRC. But there are 94 HRCs in the country and every county nationally is mapped to one of those.

CHRISTOPHER ALLEMAN: All right. Another question. Just to be clear, the average HRC has a 2.3 gigabyte footprint. Is that compressed or uncompressed? And that is compressed. That goes back to the expansion ratio. You multiply the HRC size by the 9.3. Here's one for you, Susie, what is a TIPS document?

SUSIE JOE: A TIPS document. That is included and it has information that may be helpful to you when you're working with your data. For example, it may give you information about the delivery platform, some information about again, some things that I had already gone over about what you will see when you decrypt and uncompress your SDA. You should see a file transfer summary, a SAS reading program and the data file. More things about what I already talked about too also about the type of encryption software that we use, which is PGP. And it also has on the TIPS document what the primary key is for the beneficiary, which is the DESY sort key and the primary key for the claims, which is claim underscore and the claim number.

CHRISTOPHER ALLEMAN: All right. So I think we've got a couple more regarding early into the SAS. What is the requirement for SAS and do I need to have a SAS program on my pc in order to run executable?

SUSIE JOE: You do not need to have SAS on your pc to run the executable. Not exactly sure about the question about the requirement for SAS. You have to have the SAS software on your pc to be able to use SAS or SAS on your if you're using UNIX or another platform, you have to have SAS installed there if you want to move your files to UNIX and work with it there.

PAMELA PELIZZARI: Can I ask a follow-up question, Cindy —- or Susie, I'm sorry. Do you have to have SAS to use this data? Or can you use a different data analysis program?

SUSIE JOE: You can use... The data file is a fixed format [unint.] file. So you can use something other than SAS. We just don't recommend Excel or Access because of the size of the files.

PAMELA PELIZZARI: Okay. Great. Thank you.

SUSIE JOE: Uh-huh. And you can for those of you that will not be using SAS, the file layouts that are included in the extract documentation folder will give you information about the length and the format of the column. Also in your, when you open up the SDAs and the file transfer summary, the FTS document does include it for each of the data extract will also give you the starting positions and the generic format of the column such as character, numeric or date and the [unint.] of the field [ph.]. So you can use that if you were to import the data with other means other than SAS.

CHRISTOPHER ALLEMAN: All right. Another one for you, Susie. Can you again explain what format the DAT file is in? Did you say it was flat [unint.], six column?

SUSIE JOE: It's a six-column. Right. It's a six-column [unint.] file.

CHRISTOPHER ALLEMAN: All right. And would we need to use beneficiary HIC number to match institutional and non-institutional claims for the same encounter?

SUSIE JOE: No, you would use the DESY sort key. HIC number will not be in the data files.

CHRISTOPHER ALLEMAN: Okay. Looking down through the questions here. What is a carrier in this context?

SUSIE JOE: It is your physician supplier claims.

CHRISTOPHER ALLEMAN: Another question, what about the hospice and prescription drug files?

SUSIE JOE: Those are not provided.

PAMELA PELIZZARI: So this is Pamela again with the Center for Innovation and I can tell you that the hospice files are not included for a number of reasons, but it's important that from a policy perspective, when you're setting your target price, hospice is counted as an excluded service in this initiative. So you don't need to include the price of hospice in your target price. And the prescription drug files we are also... Part D drugs are not included in your target price for this initiative. So those files shouldn't be relevant to you for constructing a target price for the kind of episodes that are part of bundled payments.

CHRISTOPHER ALLEMAN: All right. Another question, is sample data in these formats available to allow us to prepare to process it? The slide that should be up on the screen now shows the URL. There are metadata and data dictionaries with file layouts available so that you can prepare to get the data and work with that.

And I think some of these questions, where again do we get the SDA size? That again is on the HRC sizes available at that website. How is it possible to get MDS and OASIS data matched to the claims data? Susie, I didn't know if you were taking that one.

SUSIE JOE: MDS and OASIS? If they have MDS and OASIS data already, they will not be able to link that data to this data. It's a different beneficiary key that is being used with this data.

CHRISTOPHER ALLEMAN: All right. Very good. And slide 23, please give some more detail about what that slide means. Well, let's go to slide 23 here. Processing data.

SUSIE JOE: Yeah. Slide 23 is talking about the key variables to join by. So the DESY sort key is your beneficiary key if you wanted to follow a beneficiary across years and across claim types and join to the denominator file, you would look at the DESY sort key. If you wanted to join your claims files together by type, you would use the claim number. So if you want to join your base claims to the revenue line center claims for HHA, you would join them using the claim number.

CHRISTOPHER ALLEMAN: Okay. I'm looking down through the list of remaining questions. It looks like maybe possibly a few policy questions as well as some repeats to as far as can we use Access or Excel and no, we don't recommend that. Here's one, Susie. We currently ordered the 5 percent sample files. Are the format and fields similar?

SUSIE JOE: The fields are similar. The format is unique in these files. Your typical LBS files are wider where [unint.] you have in more in a normalized format where you have your base and then your trailer records. The DESY sort key will be the same DESY sort key as you see in your –-the regular LBS files. The claim number will not link. The claim number is a sequential number that's attached to the records at the time of processing so they'll be different.

CHRISTOPHER ALLEMAN: All right. And Pamela, some of the policy questions. I don't know if you can see the list of those.

PAMELA PELIZZARI: Sure. I can see some questions that I'm happy to answer at this time. So please keep asking them, but I'll just start digging through the list. I see one. Someone's asked if there's a way to confirm that you'll be receiving the data you've requested. And so I can tell you that the project contact or the person who was listed on your letter of intent should have received an email already to let you know which geographic region, which HRC, you've been approved for. So if you haven't received that email and you're concerned about it, you can email us directly at bundled payments with an "s" at cms.hhs.gov and we'll be able to check into your data request that way.

I'm also seeing a good question. If after utilizing the data and working on the application, you determine that you're not going to submit an application, what do you need to do with your data or your hard drive? So I'll say that as applies to anyone who's using this data, the DUA requires, the Data Usage Agreement requires that you certify that you destroyed the data at the end of the period you're approved to use it for. So you'll notice on the DUA you signed that the expiration date is at the beginning of October of 2012. However, outside of any application delays that CMS sort of approved for you, which we would imagine to be unlikely, you are not allowed to use this data for any purpose other than the one stated.

And the stated purpose is to use this data in generating an [unint.] definition target price for the bundled payment for care improvement application. So that means that the length of the [unint.] how long it takes you to put together your application does not have to be before the application deadline. We would anticipate that after the application deadline, no one will be using this data. And that is something that you're tied to in your Data Use Agreement. You'll receive instructions later on regarding how to destroy the data, but we do get this question a lot and you're not required to send it back.

Rather, you're required to certify by signing a legal document that we will provide you with later that you've destroyed the data you received for this purpose. If you don't do that, then you will lose the ability to open any other Data Use Agreement with CMS and you'll also be in violation of that legal document. So I wouldn't start worrying about it now, but you will be asked to certify that you've destroyed the data. Let me look through and see if I see any other questions. Do you have any questions at this time that you think I could answer, Chris?

CHRISTOPHER ALLEMAN: I don't see anything here.

PAMELA PELIZZARI: Okay. It seems like we're still... Maybe I'm behind a little in the questions, but we're still getting a lot of questions about the programs you can use to interact with data. So I'll reiterate what Susie said before, which is that we're not requiring that you use any particular program, but as they said, they don't recommend that you use Assets or Excel because of the size of these files and the capacity limitations that those programs have. SAS is not a required program and [unint.] statistical package that is available commercially, but there are other commercially available and open-source statistical packages and programming languages that you can use to analyze this data. We really can't condone one in particular.

CHRISTOPHER ALLEMAN: Susie, here's one for you. It's just simply, could you explain again what an SDA is?

SUSIE JOE: An SDA is an executable file. SDA stands for self-decrypting archive. So it's just, they'll be one SDA for each data extract. It's followed by a dot exe extension. When you double click on the file, it will run. It will ask you to enter a password. You enter the password that's provided to you and then it will uncompress and decrypt and once it's finished uncompressing and decrypting, you'll see the three files that are included with each SDA. You'll see the file transfer summary document, a SAS reading program, and the data file itself.

And here's another question. Are claims on the 2008 and 2009 files based on date of admission or date of discharge? It's based on date of discharge.

PAMELA PELIZZARI: This is Pamela again. I see a couple more questions that I'm happy to answer. I see one person asking where the form is to request this data. Unfortunately, it is too late to request this data at this time if you've not already requested it. Those forms were on our website, but they were due in November. So if there's anyone on the call who's hoping now to –- for the new request this data, that's not currently a possibility. You can go through the regular process to acquire CCW data, which is available on the ResDAC website.

Another question is about someone had sent this request through an email asking about consent. And they're asking if this is different than [inaud.]. So some people are currently being subject to a consent process. If you're working with a convener, that's an organization that's helping you to sort of analyze the data [unint.] application and potentially would be managing this process on behalf of your organization. Those people participating in convener applications are going to be asked if they're aware of the convener on their behalf because we don't want organizations out there to be saying sort of I'm acting on behalf of this organization, this hospital or this physician group and I'm requesting data on their behalf if that group, physician group or hospital doesn't know about it.

So that's a different process and if you have questions about that, that would be another thing that we'd ask you to email bundledpayments@cms.hhs.gov directly and they'll be able to help you with that.

CHRISTOPHER ALLEMAN: I see another one that I can answer here. It's did the notice that was sent to the contact person on Friday also get sent to the ship-to person listed? And the general answer is yes. However, we do do those in batches and anything that was sent on Friday, there could be a second batch to go out. There were some that went out this morning. So those people should get contacted. If you have questions, you can send those to cmsdata@vangent.com.

PAMELA PELIZZARI: I see a couple people are asking for the links to the data dictionary for the file. And I would... I mean I think the easiest way –- 'cause there was a link in the presentation so I think the easiest way to go to innovations.cms.gov, which is the Innovation Center home page and at the bottom there's a link that says I believe what we're doing. If you click on "bundled payments," that will get you to the bundled payments home page. At the bottom of that there's a Learning and Resources page that you can use and that has all this information about the data files on it that we've been referring to.

Another policy question I see, someone's asked if Part B drugs are included in Model 2. And I can tell you that I know I referenced the Part D drugs earlier. Part D drugs, so prescription drugs that people get at the pharmacy are not included with Part B drugs, those would be more of the

provider-administered drugs, and those are included. And that information is in the carrier file, not in its own separate file.

There will be much more information about questions like that in the coming webinar. So you want to tune back in Wednesday and Thursday and Friday to learn about the variables that are in these files and how you use those variables to glean that kind of information.

CHRISTOPHER ALLEMAN: Susie Joe, there's another question that you can probably answer. It's about the fixed columns. Just to confirm the fixed column, do you maintain the exact position number irrespective of the presence or absence of value?

SUSIE JOE: Yes.

PAMELA PELIZZARI: Here's another question that I think that Susie could probably answer very quickly. Someone has asked if the DESY sort key is consistent across the years of claim data.

SUSIE JOE: Yes, it is.

PAMELA PELIZZARI: And that would be something they could use to link files [unint.].

SUSIE JOE: Yep.

PAMELA PELIZZARI: I see another question about the HRCs. Someone says HRCs are listed by number but they have descriptive titles in the original application and then they're wondering if there's a key to those. So I believe on our website you're referring to the research request packet and does that have descriptive titles for the different HRCs? So it says things like Boston, Massachusetts and that's how a lot of people requested their HRCs. You can see the numbers though in that appendix to the research request packets. So starting on page 11 of the research request packet, there's a list of all the HRCs and in that [unint.] there is a number next to every HRC that will tell you the HRC number. And that should be a useful crosswalk [ph.] for you.

Susie, it looks like someone has asked in one of the slides, the denominator file appeared to be a Word document rather than a data file. Is this true?

SUSIE JOE: Yes. That is the denominator for a document that you see under Extract Documentation folder. Let me go back to that. The Word document is simply the layout. Let's see what slide was that in? Twelve. So the Word document, that contains the layout. I'm sorry. Not the layout, the data dictionary for the denominator file. The other claims files, carrier, DME, HHA, inpatient, and outpatient, they're in plain text files that you can open them in Notepad [unint.].

PAMELA PELIZZARI: So, on the program side I see a lot of people are asking if April 30th is still the deadline for submitting applications. And I can tell you that April 30th is still the deadline and if you disagree with this, you're welcome to give us feedback, but at this time we don't anticipate sort of giving incentives to people on a one-on-one on basis. That being said, we are very interested in hearing from you about the experience you're having analyzing the data and as you sort of get into the process, you're welcome to be in touch with us to let us know how it's going and if you don't feel like the deadline is giving you reasonable time to do that analysis.

I'm also seeing a couple more people asking about when the recording is going to be available. And as I mentioned, it takes us a little while to get that file processed and posted. So I would say if you don't see it on the website within about a week, then feel free to shoot us an email, but I assure you we're working on it and so if you could just give us a few days to try and get it out before you get in touch, that would be helpful.

I see someone asking here if the HRC sizes are per year. So if the file size you give for instance HRC number 3 is going to need to be doubled because they're getting data from both '08 and '09. Can Susie or Chris respond to that one?

SUSIE JOE: The size that's posted is the total size of all the SDAs for both years.

PAMELA PELIZZARI: Okay. Great. Thank you.

CHRISTOPHER ALLEMAN: Looking down through the list there's some repeat questions and I don't see any new ones specifically I think that Susie or I would answer. Let's see. Is there an explanation of the various files and content available? Again, that would be on the Learning and Resources area, the file layouts and data dictionaries.

PAMELA PELIZZARI: I see one good question. If you have decided not to apply, can you stop the data from being sent? I think that's a really good question. So we have gotten a lot of people asking sort of what happens when I know I'm not going to apply? Because I think a lot of people want to look at the data and examine the opportunities before they commit to putting in an application and that's fine. We understand that that's going to happen. If you have already decided that you're not going to apply, you can stop the data from being sent at this time.

In order to do that, I would ask you to send an email to bundledpayments@cms.hhs.gov and in that email please be sure to include whoever is the project contact for your organization because we're going to need to make sure that whoever originally submitted the application is onboard with cancelling it. Not the application. I apologize. The letter of intent. We want to make sure that everyone understands and is kind of onboard to stop the data from being sent. So we can still do that and you're welcome to do that. We would actually be happy to process those requests at this time.

Another person has asked if I'm in a convened group, will I still get a hard drive? So that's an interesting question and I'll say it depends. Some people who are in convened groups have all applied for their data separately. So an individual, say post-acute provider who's in a convened group has decided that they want to analyze their own data and so they've applied separately for data. They've filled out their own DUA and sent in a research request packet. In that case, that provider will receive their own hard drive.

If you're in a convened group, however, and they've requested data on your behalf, you will not receive an individual mailing necessarily. You can discuss with your convener, that's whoever's requested the data, that you'd like a copy and if you're a signatory to the DUA, so if you signed a DUA Signature Addendum, you can also receive a copy of that data from them. But from our perspective, we're only shipping out the data to the person who was designated to receive that data on your original research request packet.

And as I mentioned before, unless you have an extremely extenuating circumstance, we're not going to be processing changes in that. So please do contact us if say that person doesn't work in your organization anymore because we don't want to ship to someone who's not there. But if you just have decided someone else is going to be in charge of that, that's going to be a problem for us because we can't sort of respond to so many requests like that.

So here's a question for you, Susie and Chris, is the included [unint.] data organized by calendar year or by fiscal year?

SUSIE JOE: Calendar year. And here's a question. Can you make the slide presentation available prior to the webinar? And they are, they're posted now on ResDAC's website, www.resdac.org. So you'll see the slides posted there for the other presentations this week.

PAMELA PELIZZARI: Yes. And that's the link that I sent out to you all about 20 or 30 minutes ago. And there will be a link to that page on our CMMI website within about a day. But you can find it on the ResDAC website now. You don't have to wait. Cindy, I don't know if... I'm sorry. Susie, I keep making that mistake.

SUSIE JOE: That's okay.

PAMELA PELIZZARI: I don't know if you know the answer to this one, but someone has asked about how long it takes for each SDA to decrypt and if you can decrypt multiple SDAs at once.

SUSIE JOE: Chris, do you know the answer to that? Have we tried that?

CHRISTOPHER ALLEMAN: Sorry. I was on mute. No, we haven't. We usually recommend that they... Because the files are so large, we recommend that they uncompress them and then move them to where they're going to work with them and do that one-by-one. So I don't really know that we have firm details as far as how long it takes, but that's something we could certainly look into and post in the frequently asked questions.

PAMELA PELIZZARI: All right. Sorry, I didn't know if you were already aware. Here's one that I think I've heard you answer before for me at least. Is it possible for a person to be in both the 2008 and the 2009 HRC in a given year? I'm sorry. Can a person be in multiple HRCs in a given year?

SUSIE JOE: Yes.

PAMELA PELIZZARI: And that would be if they —- in what scenario?

SUSIE JOE: So say in 2008 they lived in one location that would put them in say HRC 1, and then in 2009 that person lived in another location that would put them in HRC 2, so that person would be included in HRC 1 for both years, 2008 and 2009 and they will also be included in HRC number 2 for 2008 and 2009.

PAMELA PELIZZARI: Thank you so much. So I see a number of policy questions again. Some people have asked if you have decided that you need to involve an outside firm to help you analyze the data but you did not include that in your DUA, is that okay? So everyone who's analyzing the data needs to be a signatory to the DUA. So that means that you either signed the DUA itself or DUA Signature Addendum. So that if you have a new person coming on who's

going to be working on this, then please have that new person sign a DUA Signature Addendum, which can be found on the Center for Innovation website. They need to sign that and you'll need to send it to us.

We would much prefer that that come from the project contact at the organization itself. So if you are a hospital for instance and you're involving a consultant or a private company, we'd rather not get that email from that private company but rather from you at the hospital so that we can be certain that you're actually contracting with that person. So it is okay again if they weren't in your original DUA, but they do need to sign a DUA before they are allowed to analyze the data.

We have another question, what is the expected turnaround to an email question? And I think that's a really good one sort of here near the end. So we do at the Center for Innovation respond to every question that comes in to us. Some of them take a little bit of time because we have to check in on things and make sure we're not giving you misinformation. So if you have a question that we've answered before, we'll usually get back to you very quickly within a couple of days.

But everyone who submits a question should receive some response within about a week to a week and a half. And unfortunately, that response might be, "We're having extremely high volume," or, "We'll get back to you as soon as we can. Thank you for submitting your question." But if you think you've submitted a question and you haven't heard anything back, feel free to resubmit it because we do respond to every question. At this point we might be sort of sending those questions to these various sources, but I think that there still should be a relatively rapid turnaround time.

So I'm seeing that there are several questions that we're not going to have time to answer and I'd like at this point to discuss the next steps. So if you have a question that wasn't answered during this webinar, we would ask that you please email it to one of the following sources. And if you're not sure who should take your question, then you can email it to us at bundled payments with an "s" at cms.hhs.gov and those will be any kind of policy questions about the program itself or any questions about your Data Use Agreement. So privacy questions or how to add additional users, things like that. That will be bundledpayments@cms.hhs.gov.

If you have technical questions of the kind that we've been talking about today, those questions would go to cmsdata@vangent.com. So that would be the address that's currently on your screen. If you have questions, and we've been avoiding that in this webinar about the nature of what exactly is in each variable in the data file, those are questions for ResDAC, the Research Data Assistance Center. And they'll be hosting the webinars this week on Wednesday, Thursday, and Friday. So we actually ask that you hold off on emailing us those questions and come back for the webinars on Wednesday, Thursday, and Friday of this week.

But they will have separate contact information and they'll have a separate process just like this cmsdata@vangent.com wanted you to say "bundled payments" in the subject line and include your DUA number. The same will go for ResDAC. And so you can learn more about ResDAC in our Wednesday, Thursday, and Friday webinars this week.

I'd just like to reiterate at this time that all of this information will be posted. The slides themselves are already posted on the ResDAC website. That's resdac, R-E-S-D-A-C,

www.resdac.org/paymentbundlinginitiative.asp. Now, I sent that out, but if you didn't catch it, you can email us at bundledpayments@cms.hhs.gov and we'll get to it.

We ask at this time because we are running out of time, but we'll leave a few minutes for everyone to take the survey. So please click on that survey link in the bottom center of your screen and there's just a couple of questions that are going to help us out in determining what we can do to support you through this process. Thank you so very much to our presenters, Susie Joe and Chris Alleman. And if you have any further questions, please direct them to one of the sources that we've described here today and we'll make sure your question gets answered. Thanks very much and I think we'll [unint.] at this time to do the survey.

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