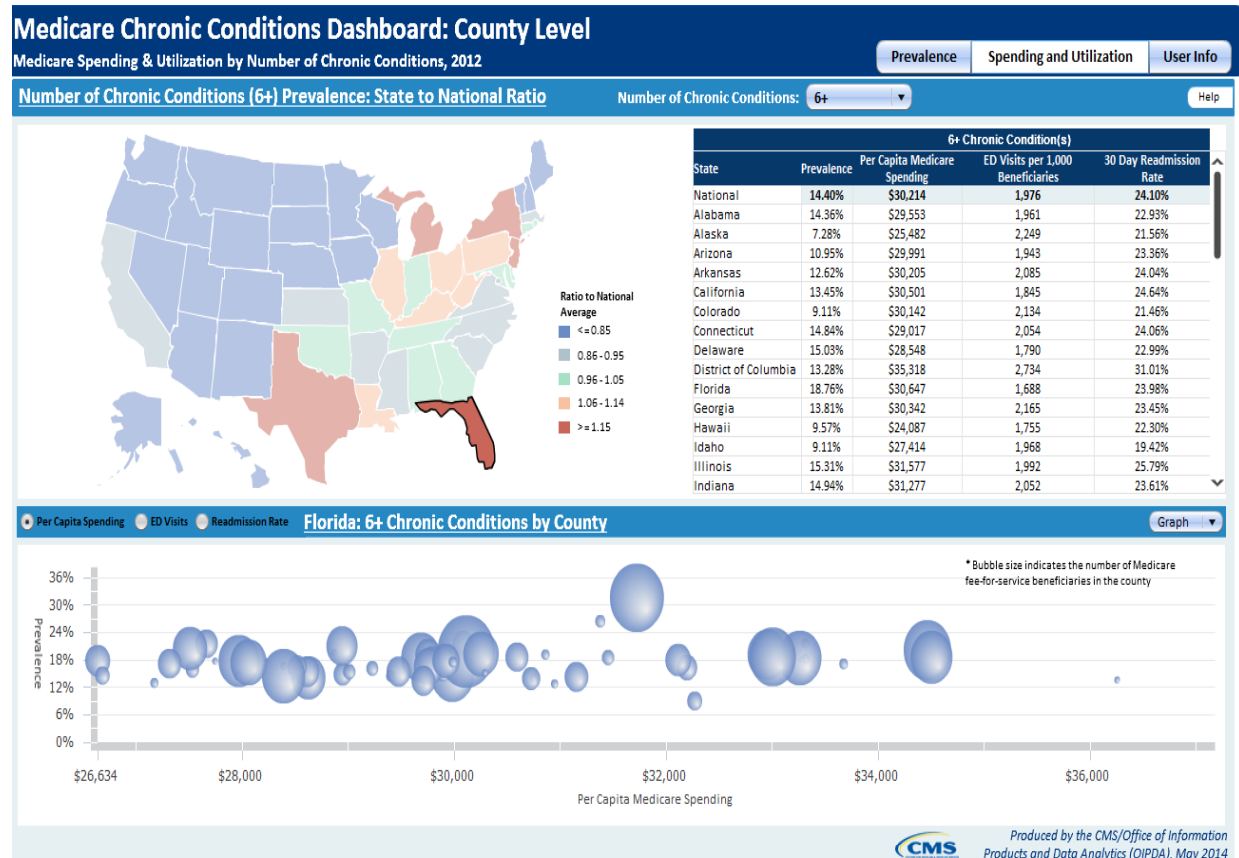# CMS Data and Information Products

Transitioning to a Data Driven Culture at CMS

- Data has traditionally been viewed as more of a by product of CMS operations than a core function

- At the leading edge of a new wave of uses of CMS data and types of CMS data users with accompanying increases in data volume and data interchange

- In June 2012, CMS announced the creation of a new office, the Office of Information Products and Data Analytics (OIPDA), to take the lead in making data use and dissemination a core function of the agency – key functions of OIPDA include:

  - Employing advanced analytics to create actionable **information products**

  - Establishing new policies to support **external use of CMS data**, while maintaining appropriate beneficiary protections

  - Expanding **internal use of data and analytics** to inform policy decisions and evaluate programs

Open Data at CMS

- CMS is making more program data available in multiple formats to spur innovation and let the private sector leverage the data to its greatest potential

- Public use files and interactive dashboards at the state, HRR, and county level on:
  - Chronic conditions
  - Geographic variation in spending and quality

Open Data – Provider Utilization and Payment Data

- Since May 2013, CMS has released several datasets that summarize utilization, payments, and charges for procedures and services provided to Medicare fee-for service beneficiaries

  - Hospital inpatient stays – 190,000 downloads since May 2013
  - Hospital outpatient visits – 27,000 downloads since June 2013
  - Services delivered by physicians and other suppliers – 44,000 downloads since March 2014

- All data releases accompanied by detailed documentation including a methodology paper and FAQs

- Any row based on <11 beneficiaries is suppressed to protect beneficiary privacy

Provider Utilization and Payment Data Details

- Hospital Inpatient
  - Years: FY2011 and FY2012
  - Segmentation variables: National Provider Identifier (NPI) and Diagnostic Related Group (DRG)

- Hospital Outpatient
  - Years: CY2011 and CY2012
  - Segmentation variables: NPI and Ambulatory Payment Classification (APC)

- Physician and other supplier
  - Years: CY2012
  - Segmentation variables: NPI, Healthcare Common Procedure Coding System (HCPCS) code, and place of service (i.e., facility vs. office indicator)

Data Dissemination Activity

- CMS is routinely and safely sharing data to support the transformation of the delivery system

    - Accountable Care Organizations (ACOs)

    - Qualified Entities (QEs) – Medicare Data Sharing for Performance Measurement Program

    - Researchers

    - Others

        - States for care coordination purposes

        - Innovation Center grantees (e.g., Health Care Innovation Awardees)

- CMS has also allowed beneficiaries full and open access to their Medicare claims data through the Blue Button Initiative

Blue Button
Download
My Data

Monthly Data Feeds for ACOs

- CMS is sending near real-time data to Accountable Care Organizations (ACOs) for patients enrolled in ACO

- Include beneficiaries entire claims history, including all service types, procedures and supplies.

- Opportunity for private sector to help ACOs transform the data to clinical information

Qualified Entity Program

- Section 10332 authorizes the release of Medicare Parts A, B, and D claims data to qualified entities for performance evaluation of providers

- Qualified entities <u>must</u> combine the Medicare claims data with other claims data

- Qualified entities <u>must</u> report measure results publicly after allowing time for providers to review the results and request correction of errors

  - Standard measures: NQF measures or those used in a CMS program

  - Alternative measures: approved through stakeholder consultation or

Research Data Dissemination

- The Chronic Condition Warehouse (CCW) is CMS' **research** data warehouse designed to support external researchers and internal CMS research and analytic functions

- Unique beneficiary ID allows user to link data across all CCW data – including:
  - Medicare beneficiary demographics and enrollment (1999-current)
  - Medicare fee-for-service (FFS) claims (1999-current)
  - Medicare Part D event data (2006-current)
  - Medicaid eligibility and claims (1999-2010)
  - Medicare-Medicaid linked files (2006-2009)
  - Assessment data (instrument inception-current)

- New data access method: Virtual Research Data Center (VRDC)

VRDC Benefits

ACCESS

- Researchers use own laptop to securely access data remotely
- Increases efficiency of data sharing and reduces infrastructure costs for data users

SECURITY

- No shipping of data on external media
- Users only see data files with the data they need to conduct their project
- CMS can track and monitor use of the data

PRIVACY

- Users may only remove aggregated output files; no granular identifiable output may be taken out
- CMS encrypts all beneficiary identifiers
- CMS can encrypt physician identifiers

DATA & ANALYSIS

- Users can perform their own analyses and data manipulation in the virtual environment
- Secure File Transfer System allows users to upload their own data and download output files efficiently and securely