Commission on Evidence-Based Policymaking

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Introduction to CMS

Over **140 million Americans** receive healthcare coverage through programs administered by CMS

- **Medicare**
  Health insurance for individuals age 65 and older, as well as those with disabilities

- **Medicaid/CHIP**
  Health insurance managed by the states for individuals with lower incomes

- **Health Insurance Marketplaces**
  A resource that allows individuals to sign-up for private health insurance with tax credits to offset premiums
Finding CMS Publicly Available Data

CMS makes lots of data available to download for free

Data.CMS.gov

Data.Medicare.gov

Connecting People with Data

Start
Releasing Machine Readable Data – Provider Payment and Utilization Files

- Public data sets with payment and utilization information for services and procedures provided to Medicare beneficiaries
- Data released to date covers > 85% of Medicare program payments

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<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Hospital Inpatient &amp; Outpatient</strong></td>
<td><strong>Physician &amp; Other Supplier</strong>*</td>
<td><strong>Part D Prescriber</strong></td>
<td><strong>DME and POS</strong></td>
<td><strong>Home Health Agency</strong></td>
<td><strong>Skilled Nursing Facility</strong></td>
<td><strong>Hospice</strong></td>
</tr>
<tr>
<td>3,000 Hospitals</td>
<td>880,000 NPIs</td>
<td>Over 1M NPIs</td>
<td>385,000 NPIs</td>
<td>11,000 HHAs</td>
<td>15,000 SNFs</td>
<td>4,000 Hospices</td>
</tr>
<tr>
<td>150,000 records</td>
<td>9M records</td>
<td>23M records</td>
<td>1.9M records</td>
<td>100,000 records</td>
<td>80,000 records</td>
<td>4,000 records</td>
</tr>
<tr>
<td>$62B in payments</td>
<td>$90B in payments</td>
<td>$103B in drug costs</td>
<td>$11B in payments</td>
<td>$18B in payments</td>
<td>$28B in payments</td>
<td>$15B in payments</td>
</tr>
</tbody>
</table>

*Updated to include demographic and health information associated with the provider’s beneficiary panel in October 2015
The national average for dispensing generic drugs is 76.0%. NM’s state average (77.2%) is slightly higher.

Across NM ZIP-codes, generic dispensing rates range from 0% to 100%. One-third of NM ZIP-codes have rates below the state average.
### Part D Prescribers in Albuquerque (ZIP-code 87109)

**Albuquerque, NM: ZIP 87109**

545 Providers, Average GDR = 71.5%

<table>
<thead>
<tr>
<th>Provider Name</th>
<th>Provider Specialty</th>
<th>Drug Claims</th>
<th>Generic Drug Claims</th>
<th>Generic Drug Dispensing Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Weinstein</td>
<td>Ophthalmology</td>
<td>4,834</td>
<td>594</td>
<td>12.3%</td>
</tr>
<tr>
<td>J. Dorf</td>
<td>Pulmonary Disease</td>
<td>2,963</td>
<td>515</td>
<td>17.4%</td>
</tr>
<tr>
<td>T. Watterberg</td>
<td>Ophthalmology</td>
<td>2,123</td>
<td>433</td>
<td>20.4%</td>
</tr>
<tr>
<td>V. Valentine</td>
<td>Clinical Nurse Specialist</td>
<td>1,078</td>
<td>348</td>
<td>32.3%</td>
</tr>
<tr>
<td>R. Allen</td>
<td>Ophthalmology</td>
<td>1,713</td>
<td>619</td>
<td>36.1%</td>
</tr>
<tr>
<td>J. Krawchuck</td>
<td>Nurse Practitioner</td>
<td>1,371</td>
<td>604</td>
<td>44.1%</td>
</tr>
<tr>
<td>B. Monson</td>
<td>Ophthalmology</td>
<td>1,096</td>
<td>521</td>
<td>47.5%</td>
</tr>
<tr>
<td>R. Patel-Trujillo</td>
<td>Internal Medicine</td>
<td>1,757</td>
<td>877</td>
<td>49.9%</td>
</tr>
</tbody>
</table>

These 8 providers all have at least 1,000 total drug claims and a generic drug dispensing rate (GDR) < 50%.

The most prescribed brand name drug by this provider is Vigamox, which accounted for 34.2% of his total claims ($188,354).
Building Consumer Friendly Interfaces
**Enabling Cutting Edge Health Care Research**

- **Research Data Assistance Center (ResDAC)** provides assistance to researchers interested in using Medicare and/or Medicaid data.

- The **Chronic Condition Warehouse (CCW)** is CMS’ research data warehouse designed to support external researchers and internal CMS research and analytic functions:
  - Contains over 315B records with 1B records added monthly
  - Unique beneficiary ID allows data linkages across all CCW data

- New innovator research data access expands current data release policy to allow innovators to access CMS data to create products they intend to sell.
Available Research Data Files

- Medicare enrollment and claims (1999-current)
- Medicare Part D event data (2006-current)
- Medicaid eligibility and claims (1999-2013)
- Assessment data (instrument inception-current):
  - Long Term Care Minimum Data Set (MDS)
  - Home Health Outcome and Assessment Information Set (OASIS)
  - Inpatient Rehab Facility – Patient Assessment Instrument (IRF-PAI)
- Shared Savings Program and Pioneer ACO files (2013-current)
- Medicare Data on Provider Practice and Specialty (2008-current)
- Administrative data linked to surveys (e.g., Health and Retirement Survey, National Health and Aging Trends Study)
Types of Research Data Files

- CMS makes two types of files available to researchers
  - Limited Data Set (LDS) files which excludes specific direct identifiers, including name, address, HIC, SSN, DOB, ZIP Code and medical record number
  - Research Identifiable Files (RIFs) which are custom CMS data extracts that may contain direct beneficiary identifiers
- LDS files are easier to request (less documentation and CMS review) but users face additional limitations on use of the data

<table>
<thead>
<tr>
<th>Research Identifiable</th>
<th>Limited Data Sets</th>
</tr>
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<tbody>
<tr>
<td>Requires CMS Privacy Board Review?</td>
<td>Yes</td>
</tr>
<tr>
<td>Data file can be customized to only include a specific cohort (e.g., diabetics residing in MN)</td>
<td>Yes</td>
</tr>
<tr>
<td>Data can be linked to non-CMS data using a beneficiary identifier (SSN or Medicare id)</td>
<td>Yes</td>
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</table>
Researchers have been receiving CMS data for decades
  - Requests have grown exponentially over the past couple years
  - Researchers are requesting more timely and less expensive data

CMS developed the VRDC to meet researchers evolving needs

VRDC is a secure and efficient means for researchers to virtually access and analyze the vast store of CMS data in the CCW

VRDC benefits
  - Lower cost, more timely data
  - Researchers use own laptop to securely access and analyze data remotely
  - Increased security for sensitive data
  - Additional privacy protections – no beneficiary identifiable data may leave the secure environment