

Data Sharing Agreement Opportunity

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Today's Agenda



1. Background Information
2. New Opportunity: Streamlined Information Exchange Agreement (IEA) and Data Request and Attestation (DRA)
3. Custodian Form Update
4. Frequently Asked Questions
5. Q&A Session



Background Information

Background Information

- In 2019, the Centers for Medicare & Medicaid Services (CMS) reviewed the data files and exchanges with state Medicaid agencies supporting dually eligible beneficiaries. Those five exchanges are:
 - Medicare-Medicaid Data Sharing project (Medicare Parts A and B claims, Prescription Drug Event (PDE), and assessment data for care coordination and/or program integrity).
 - Enrollment Database (EDB) Query File.
 - Medicare Prescription Drug, Improvement, and Modernization Act (MMA) File Exchange.
 - Territory Beneficiary Query (TBQ) File.
 - State Buy-In File Exchange.
- The IEA and DRA were revised to support merging authorization of these state requests.

Background Information (cont.)

- Previously, these five exchanges required separate agreements, some of which requiring annual renewal. By merging these five exchanges under one suite of documents, CMS foresees a reduction in the burden on states through fewer agreements to maintain and less annual submissions required by each agreement.
- Single point-of-contact for questions and technical assistance (the State Data Resource Center (SDRC)).



Elective Data Files

- Under the elective data file queries, the state Medicaid agency submits a “finder” file to CMS, identifying Medicaid individuals for whom they seek Medicare data. CMS returns a response file containing the matched Medicare eligibility and enrollment data from the respective CMS database.
 - **The EDB File** data from the CMS Enrollment Database. The CMS response file returns data on Medicare Parts A and B entitlement and enrollment only.
 - NOTE: CMS will not accept new requests for EDB file use.
 - **The TBQ File**, in which CMS returns data from the CMS Medicare Beneficiary Database on Medicare Parts A, B, C, and D, including Medicare Part D Low Income Subsidy eligibility.

Elective Data Files (cont.)

DRA # _____
PMA Choose an item.

1) The state PMA requests (select all that apply):

- **Medicare-Medicaid Data Sharing Program**

- CMS currently provides states the ability to request the following data for their dually eligible population:

- Medicare Parts A and B claims data.
- Medicare Part D PDE data.
- Medicare eligibility/enrollment data (Master Beneficiary Summary File).
- Assessment (Minimum Data Set, Outcome and Assessment Information Set, Inpatient Rehabilitation Facility Patient Assessment Instrument, or Swing Bed) data.
- Other summary files (Medicare-Medicaid Linked Enrollee Analytic Data Source, Medicare Provider Analysis and Review, or Master Enrollee Summary File).

Medicare-Medicaid Data Sharing Program Data Table					
Historic Parts A & B and Other CCW Data					
FILES	YEARS	Care Coordination	Program Integrity	Quality Improvement	Other
<input type="checkbox"/> Claims/Events	<input type="checkbox"/> Yearly, Final Action Claims* Choose an item. To Choose an item.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Monthly, Non-Final Action Claims Date of Initial Request Click here to enter a date.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> MBSF	Choose an item. To Choose an item.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> MMLEADS	Choose an item. To Choose an item.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> MedPAR	Choose an item. To Choose an item.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> MESF	Choose an item. To Choose an item.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crosswalks: <input type="checkbox"/> BENE ID-SSN <input type="checkbox"/> BENE ID-HICN <input type="checkbox"/> BENE ID-MBI	Choose an item. To Choose an item.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assessments Data*					
FILES	YEARS	Care Coordination	Program Integrity	Quality Improvement	Other
<input type="checkbox"/> MDS	Choose an item. To Choose an item.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> OASIS	Choose an item. To Choose an item.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Swing Bed	Choose an item. To Choose an item.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> IRF-PAI	Choose an item. To Choose an item.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Part D Prescription Drug Event (PDE) Historical and Ongoing data*					
ELEMENTS	YEARS	Care Coordination	Program Integrity	Quality Improvement	Other
<input type="checkbox"/> All <input type="checkbox"/> Specify Elements: Click here to enter text.	Choose an item. To Choose an item.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional Data					
FILE NAME	YEARS	SYSTEM OF RECORD			
Click here to enter text.	Choose an item. To Choose an item. Other: Click here to enter text.	Click here to enter text.			

**New requests for historical claims and assessments data may only include up to three years of historical data for care coordination or quality improvement uses and up to five years of historical data for program integrity use. PMAs may opt to forgo historical data and request only prospective data, if they so choose.*

Operational Data Exchanges

- The MMA File Exchange and State Buy-In File Exchange are data exchanges between CMS and the state.
 - **The MMA File Exchange** supports CMS identification of dually eligible beneficiaries within a state's Medicaid population. The state submits a file providing CMS with data on the sub-category of dual eligibility, income, and institutional status for the state's Medicaid beneficiaries who already are, or are about to become, Medicare eligible. CMS returns the processing results regarding the dually eligible beneficiaries' Medicare eligibility and enrollment status on an MMA Response File.
 - **The State Buy-In File Exchange** is used to support the collection of premiums and enrollment functions. To effectuate the payment of Medicare Part A or Part B premiums, a state submits data on a buy-in file to CMS and in response, CMS returns an updated record of transactional data, as well as a Part A or Part B billing record showing the state's premium responsibility.



**New Opportunity: Streamlined
Information Exchange Agreement
(IEA) and Data Request and
Attestation (DRA)**

IEA Background

- The IEA establishes terms, conditions, safeguards, and procedures governing states' access to Medicare data for the purpose of supporting dually eligible beneficiaries.
- Download IEA [here](#).

INFORMATION EXCHANGE AGREEMENT
BETWEEN
CENTERS FOR MEDICARE & MEDICAID SERVICES
AND
THE PARTICIPATING MEDICAID AGENCY
FOR THE
DISCLOSURE AND EXCHANGE OF CERTAIN MEDICARE AND MEDICAID
DATA
OF DUALLY ELIGIBLE INDIVIDUALS

CMS AGREEMENT NO. 2020-50

I. PURPOSE, LEGAL AUTHORITIES, AND DEFINITIONS

A. Purpose

This Information Exchange Agreement, hereinafter the “Agreement,” establishes the terms, conditions, safeguards, and procedures under which the Centers for Medicare & Medicaid Services (CMS) and the undersigned state (through or on behalf of the agency that operates the state's or territory's Medicaid plan – hereinafter the “Participating Medicaid Agency” (PMA)) will exchange certain Personally Identifiable Information (PII) derived from CMS Data regarding dually eligible beneficiaries, including Protected Health Information (PHI), for the purpose of the administration of a number of programs for Dually Eligible Individuals for the *insert name of state*'s *Medicaid agency*. This IEA and the corresponding Data Request Attestation (DRA) document the PMA's assertions regarding its legal authority to request and receive such data, as well as the terms, conditions, safeguards and procedures CMS imposes on the PMA as a condition of the PMA's receipt of such data.

When executed, this IEA, along with a corresponding DRA, will offer PMAs a single streamlined data request process for such data (herein collectively referred to as “CMS Data”) for use in the administration of a number of programs for dually eligible beneficiaries, including opportunities to request certain elective data files, as well as the means of carrying out operational data exchanges that support the dually eligible population. These activities are described more fully in Section III.A., below. The data request process for such data will be managed by CMS' Federal Coordinated Health Care Office (known as the “Medicare-Medicaid Coordinated Office” or “MMCO”).

The elective data files and exchange programs may include, but are not limited to, the Territory Beneficiary Query (TBQ) File, the ability to make Enrollment Data Base (EDB) File queries, and the data files shared under the Medicare-Medicaid Data Sharing Program. Again, depending on the PMA's status as a State or Territory, the operational exchanges are the data exchanged for the State Buy-In File Exchange and the Medicare Modernization Act (MMA) File Exchange.

Changes to IEA

- Provides a single streamlined data request process for dually eligible beneficiary data for use in administering a number of programs. This process includes opportunities to request certain elective data files as well as operational data exchanges.
- The elective data files and exchange programs may include:
 - TBQ File.
 - EDB File.
 - Medicare-Medicaid Data Sharing Program.
- The operational exchanges are the data exchanged for the State Buy-In File Exchange and the MMA File Exchange.
- Removal of Downstream User Reports.

DRA Background

- The DRA establishes the terms of use governing states' access to Medicare data to support dually eligible beneficiaries.
- The DRA captures the agency's specific data request.
- Download DRA [here](#).

MEDICARE-MEDICAID DUALY ELIGIBLE DATA REQUEST AND ATTESTATION FORM

The Centers for Medicare & Medicaid Services (CMS) makes certain dually eligible beneficiary-identifiable Medicare data available to certain states and territories (collectively referred to as "participating Medicaid agency" (PMA)) for the administration of a number of programs for dually eligible individuals. This data request process for such data is managed by CMS' Federal Coordinated Health Care Office ("FCHCO," also known as the "Medicare-Medicaid Coordinated Office" or "MMCO"). CMS uses this Data Request and Attestation (DRA) form to track disclosures for accounting purposes. This DRA must be accompanied by an executed Information Exchange Agreement (IEA), which documents the PMA's assertions regarding their legal authority to request and receive such data, as well as the terms, conditions, safeguards, and procedures CMS imposes on PMA as a condition of their receipt of the data. When executed, the DRA and corresponding IEA offer PMAs a single streamlined request process to request such data for use in the administration of a number of programs for dually eligible individuals. This process includes opportunities to request certain elective data files as well as operational data exchanges.

The operational data exchanges are the State Buy-in File Exchange and the MMA File Exchange.¹ The elective data files available for request are the data files shared under the Medicare-Medicaid Data Sharing Program, the Territory Beneficiary Query (TBQ) File², and the Enrollment Data Base (EDB) File.

Instructions: The assertions in the following form are premised on a request for protected health information for the purposes outlined in the first or second paragraph of the definition of "health care operations" (HCOps) by a covered entity (CE), as those terms are defined in 45 CFR secs. 164.501 (HCOps) and 160.103 (CE), or as a "required by law" disclosure where data exchange is required by statute or regulation, as defined at 45 CFR sec. 164.103, or for "payment" purposes as defined at 45 CFR sec. 164.501. To the extent this form captures your PMA's situation, and the assertions contained herein are true and accurate with respect to your PMA's specific data request, please use it to request CMS data with respect to your PMA's dually eligible beneficiaries.

Importantly, this DRA form does not constitute CMS's opinion that you are qualified to make the assertions contained herein. To the extent that this form does not capture your PMA's situation or the assertions you wish to make, or if you are unsure as to whether it does so, consult with your legal and other appropriate counsel as necessary.

This DRA is by and between CMS, a component of the U.S. Department of Health and Human Services and the PMA named below. The PMA may utilize this form to seek protected health information (PHI), as defined in 45 C.F.R. § 160.103, as a HIPAA-covered entity for its own eligible purposes as specified in the corresponding IEA.

Name of State: _____

Name of PMA: _____

Name of Project: **CMS and Participating Medicaid Agency Disclosure and Exchange of Certain Medicare and Medicaid Data of Dually Eligible Individuals**

¹ The "MMA File Exchange" refers to the data file on which state Medicaid agencies submit dually eligible individuals as eligible individuals in a state as required in the Medicare Prescription Drug, Improvement and Modernization Act of 2003 (MMA) (Pub. L. 108-173, enacted on December 8, 2003), also referred to as the "State Phasedown File".

² The "Territory Beneficiary Query (TBQ)" File, though originally created for Puerto Rico, is available to any state Medicaid agency or territory Medicaid agency.

Changes to DRA

- Provides a single streamlined request process to request such data for use in the administration of a number of programs for dually eligible individuals. This process includes opportunities to request certain elective data files as well as operational data exchanges.
- Allows for a more streamlined process for adding downstream users and custodians to assist state Medicaid agencies with initiatives.
- Updated agreement with current data privacy and data protection language.



Custodian Form Update

DRA Custodian Form

- The updated DRA Custodian form allows for a more streamlined process for adding subcontractors or collaborating organizations to a state's DRA.
 - States can now add these organizations as a whole entity, without having to add individual users.
- Data Management Plans are no longer required for new subcontractors or collaborating organizations.

DRA # _____
State Choose an item.

MEDICARE-MEDICAID DUALY ELIGIBLE DATA REQUEST AND ATTESTATION CUSTODIAN FORM

The following individual(s) requests access to CMS data. Their signature(s) attest to their agreement with the terms and conditions defined in the Medicare-Medicaid Dually Eligible Data Request and Attestation (DRA) for "CMS and Participating Medicaid Agency Disclosure and Exchange of Certain Medicare and Medicaid Data of Dually Eligible Individuals."

Custodian: Individual(s) who will have actual possession of the CMS data files, and who will be responsible for observance of all conditions of use, including the establishment and maintenance of security arrangements to prevent unauthorized use. Please note, CMS only requires one custodian per organization, exceptions include:

- All individuals that require AXWAY access (for electronic, monthly Parts A/B) need to be listed as Custodians on the DRA.
- All individuals to which data will be shipped need to be listed as Custodians on the DRA.
- All individuals who will be submitting DRA changes need to be listed as Custodians on the DRA.

Subcontracting/Collaborating Organization: These are organizations that work with the PMA but do not have possession of the data. For these organizations we do not add individual users to the DRA. We only add the organization information itself.

Custodian Type: Choose an item.

Name: _____

Phone: _____ Ext: [Click here to enter text.](#) Email: _____

Organization Name: _____

Business Address: _____

City: _____ State: Choose an item. ZIP Code: _____

This Data Custodian is responsible for (please specify feeds):

- MMA File Exchange
- State Buy-in File Exchange
- TBQ File
- EDB File
- Medicare-Medicaid Data Sharing Program

Signature of Custodian

Date [Click here to enter a date.](#)

X

DRA Roles and Responsibilities



Requestor: The requestor is responsible for managing custodians associated with the DRA. Custodians can act as a point of contact on the requestor's behalf.



Custodian: Individual(s) who will have actual possession of the CMS data files, and who will be responsible for observance of all conditions of use, including the establishment and maintenance of security arrangements to prevent unauthorized use.



Subcontractors or Collaborating Organizations: An organization that works with the state Medicaid agencies to provide support with CMS approved initiatives.

How to Submit Custodian Changes

- A DRA custodian or requestor has the authority to request a change to the DRA.
 - The custodian or requestor will have the new potential custodian complete the [DRA custodian form](#).
 - After the form is complete and signed, the custodian or requestor can submit the request to CMS and SDRC for processing.
- SDRC and CMS will work together to update the DRA appropriately.

Next Steps

- These documents may be familiar to many states, as they are updates to the current Medicare-Medicaid Data Sharing program's current IEA/DRA. By contract, the MMA File, State Buy-In File, TBQ File, and EDB File are under different agreements. CMS and SDRC will work with state personnel to educate, answer questions, and guide through this process. We ask states to:
 - Review new IEA and DRA documents.
 - Identify key state staff for each data exchange involved.
 - Request a call with CMS and SDRC. We will review any specific questions and educate new state personnel.
 - Decide on a timeline for signing the new IEA/DRA.



Frequently Asked Questions

FAQs

Questions	Answers
My organization currently has different contacts for the Medical Eligibility and Enrollment Data (MEED) DUA and Medicare-Medicaid Data Sharing Program. Are we able to keep multiple points of contact?	Yes, you are able to provide your preferences in regard to points of contact to SDRC.
Will the datasets automatically be updated for all exchange files?	Yes, the DRA allows for continuous data to be provided to the state.
Does the IEA or DRA expire?	The IEA will need to be renewed every 5 years. The DRA does not have an expiration.
Will I have to re-submit the paperwork for everyone that I currently have listed on my MEED DUA?	No, SDRC and CMS will merge the two agreements together. SDRC will be reaching out to your state to confirm all custodians and downstream users are still active.

FAQs (cont.)

Questions	Answers
Will the IEA and DRA cover the Coordination of Benefits Agreement (COBA) file?	No, the COBA feed will continue to be apart of the COBA.
I am not sure who is responsible for the other data files within my organization. Can you provide the contacts for the MEED DUA and State Buy-In exchange?	Yes, CMS can share the CMS contacts for each file. Please contact SDRC if you are interested in obtaining this information.
What is the timeline for my organization to sign the new IEA and DRA?	If your state has an approaching IEA expiration date, we suggest signing the new agreements prior to the expiration. For those states with IEAs not expiring soon, SDRC will reach out to discuss options/next steps.
I am not sure if the new agreements are a good fit for my organization. Does my organization have to sign the new documents?	Please contact SDRC and CMS to discuss your concerns about the new IEA and DRA as well as potential alternatives.



**Questions can be submitted to SDRC at
(877) 657-9889 (support line) or
SDRC@EconometricaInc.com.**

Thank you!