

Request to Access HMS Medicaid Data

DHCRC and HMS have agreed to collaborate to provide an effective means of giving researchers and students access to HMS Medicaid Data. HMS has housed the Data in a secure instance of Amazon Web Services in the United States and will manage the data environment in accordance with HMS' security requirements. HMS has provided DHCRC access to the Data and HMS wishes to facilitate enabling DHCRC to make that Data available to researchers and students for the performance of Academic and Non-Commercial Research Purposes. The Data will be made available on terms and conditions set out in a Data Use Agreement.

'Academic and Non-commercial Research Purposes' means research or development that is internally funded by a User or the institution by which they are engaged or enrolled, or that is funded by the Australian Commonwealth Government or the United States or a State or Territory government or statutory corporation or by a philanthropic or charitable organisation under a funding agreement that does not transfer ownership of intellectual property rights to the funding party. Further, Academic and Non-commercial Research Purposes means the researchers and students will not commercialise the intellectual property related in any way to research using the Data.

Institution name	
Institution address	
Institution contact name	
Institution contact email	
Institution contact phone	
Institution supervisor name	
Institution supervisor contact email	
Institution supervisor contact phone	
User (Researcher/Student) name	
User contact e-mail	
User contact phone	
Start date	
End date	

Project description

Please describe the proposed project, the use that will be made of the HMS Medicaid Data, the nature of the Data to be accessed, the format in which the User requires the Data, whether ethics approval is required/has been obtained and the proposed methodology including the outcomes and likely benefit of the research project to be undertaken by the User.

Data sets required: (see Appendix A)

- Institutional
- Medical
- RX
- Dental (Florida, Nevada, Colorado, West Virginia, Ohio, Kentucky-2015)
- Eligibility
- Provider

States and Years requested:

- Florida- PCF format¹ (2015-2020)
- Nevada- CCDB format² (2015-2020)
- Colorado- CCDB format (2015-2020)
- Idaho- CCDB (2015-2020)
- West Virginia- PCF format (2015-2020)

¹ Paid Claims File (mainframe format)

² Consolidated Claim Data Base



- New Mexico
- Care Source Datasets
 - Ohio- PCF format (2014-2020)
 - Georgia- CCDB format (2017-2020)
 - Kentucky- CCDB format (2015-2020)
 - Indiana- CCDB format (2017-2020)

Additional information/request

Note: Users will be required to inform HMS and DHCRC of the results of the research using the Data and:

- a) prior to publication, provide them with a copy of any publication which relies on or uses the Data; and*
- b) on request, acknowledge DHCRC and HMS as the providers of the Data in any publication or presentation of such results.*

Approved:

by the User:

Name (print)

Signature

Date

by the Institution

Name (print)

Signature

Date

by DHCRC

Name (print)

Signature

Date





by HMS data custodian:

Name (print)

Signature

Date

Appendix A: Datasets

Institutional: This file contains data items from institutions such as hospitals (including emergency room and one day surgeries) and other facilities (nursing facility, long term care, federally qualified health centres, dialysis clinics, etc.). The data fields in this file are those that are billed using the “UB04” (CMS-1450) paper claim form or (ANSI X12 837I version 5010) electronic form. UB04 contains “header” information about the provider, patient, and the presenting diagnosis and conditions - as well as (for inpatient claims only) the ICD10 procedures. In addition to the header information, the UB04 also contains detail lines that itemize the service charges (including drugs, prosthetics, operating room, anaesthesia, etc). The detail lines are organized by “Revenue codes” which describe the category of the charge. So, for instance Revenue Code 250 is for drugs. In most cases, this is all the information that is on the line, but in some cases, there are procedure codes (CPT-4 and HCPCS) that provider further detail on the type of service being billed for on the line.

Medical: This file contains information about professional type charges, which are billed on the (CMS 1500) paper form or (837P version 5010) electronic form. This has some header information about the provider and patient, and detail lines for each service rendered. Services are described by means of CPT-4 and HCPCS procedure codes, and contain the units billed for each one. The form also contains diagnosis codes.

RX: This file contains information about the drugs that were billed to Medicaid. Most outpatient drugs (from a pharmacy) are billed electronically using an NCPDP standard layout. The key fields for pharmacy are National Drug Code (NDC) which describes the exact drug, units billed, and days-supply.

Dental: Dental Claims are usually billed on (CMS 1500) paper form or (837D version 5010) electronic form but contain an extra set of fields that describe the tooth-number.

Eligibility: This file contains information about the recipients of services including age, gender, race, ethnicity, language, marital status, etc. and the reasons why they are eligible to receive Medicaid services.

Provider: This file contains information about the providers of medical services including provider’s type, specialty, county, address etc.

