Request for Records Disposition Authority

Records Schedule Number DAA-0440-2015-0009

Schedule Status Approved

Agency or Establishment Centers for Medicare and Medicaid Services

Record Group / Scheduling Group Records of the Centers for Medicare and Medicaid Services

Records Schedule applies to Agency-wide

Schedule Subject Bucket 7- Research and Program Analysis

Internal agency concurrences will

be provided

No

Background Information CMS is proposing a big bucket approach to records scheduling and

disposition, which will include the following buckets:

Bucket 1 - Leadership and Operations
Bucket 2 - Administrative Management

Bucket 3 - Financial Records (programmatic)

Bucket 4 - Enrollment Records Bucket 5 - Beneficiary Records

Bucket 6 - Provider & Health Plan Records Bucket 7 - Research and Program Analysis Bucket 8 - Public Outreach and Engagement

Bucket 9 - Compliance and Integrity

A crosswalk is provided documenting the relationship of these buckets with previously approved disposition authorities.

Item Count

• •		Number of Temporary Disposition Items	Number of Withdrawn Disposition Items
3	2	1	0

GAO Approval



Sequence Number	,
1	Research and Program Analysis: Public Use, Statistical and Summary Files
1.1	Public Use Files and Reports Disposition Authority Number: DAA-0440-2015-0009-0001
1.2	Analytic and Research Files (restricted) Disposition Authority Number: DAA-0440-2015-0009-0002
2	Research and Program Analysis: Supporting Records Disposition Authority Number: DAA-0440-2015-0009-0003



Records Schedule Items

Sequence Number

1

Research and Program Analysis: Public Use, Statistical and Summary Files Records that formally document CMS programs and facilitate research. This includes records created to allow analysis of CMS program use, implementation, and outcomes. These public use, statistical, and summary files include those related to specific CMS programs such as Medicare Parts A and B, Medicare Part D, and Medicaid. Also included are research files for special areas of public interest, such as Chronic Conditions and physician costs; as well as general research files on overall expenditures and health care codes.

1.1

Public Use Files and Reports

Disposition Authority Number

DAA-0440-2015-0009-0001

Records created by CMS to support research and to document the efficiency of programs. Includes public use files (PUFs) created specifically for public use, primarily for research into utilization and implementation of all CMS programs. Includes datasets for public use and data manipulation, as well as static published reports based on CMS or third-party analysis. Includes those records that do not have access restrictions

Final Disposition

Permanent

Item Status

Active

Is this item media neutral?

No

Explanation of limitation

Records are exclusively electronic.

Do any of the records covered by this item currently exist in electronic format(s) other than email and word processing?

Yes

Do any of the records covered by this item exist as structured

Yes

electronic data?

GRS or Superseded Authority

Citation

DAA-0440-2012-0013 / 0002 DAA-0440-2013-0006 / 0001

DAA-0440-2013-0006 / 0002

N1-440-01-02 / 3/c/1/b N1-440-01-02 / 3/d/1 N1-440-09-04 / 3/a N1-440-93-03 / 1 N1-440-93-03 / 2 N1-440-93-03 / 3

N1-440-94-02 / 1

Disposition Instruction

Cutoff Instruction Cutoff at the end of the calendar year.

Transfer to the National Archives

for Accessioning

Transfer to the National Archives 5 year(s) after

cutoff

Additional Information

What will be the date span of the initial transfer of records to the

National Archives?

From 1999 To 2015

How frequently will your agency transfer these records to the

National Archives?

1.2

Every 1 Years

Analytic and Research Files (restricted)

Disposition Authority Number

DAA-0440-2015-0009-0002

Records created by CMS to support research and to document the efficiency of programs. Includes research and analytic files created for research into utilization and implementation of all CMS programs. Includes datasets as well as static published reports based on CMS or third-party analysis. Includes those records that have access restrictions, primarily due to the inclusion of personally identifiable information (PII) (see item 7A1 for records without any restrictions).

Final Disposition Permanent

Item Status Active

Is this item media neutral?

Explanation of limitation Records are exclusively electronic.

Do any of the records covered by this item currently exist in electronic format(s) other than email and word processing?

Yes

Do any of the records covered by this item exist as structured

electronic data?

Yes

GRS or Superseded Authority

Citation

N1-440-09-10 / 3/a

Disposition Instruction

Transfer to the National Archives

for Accessioning

Transfer to the National Archives 20 year(s) after

cutoff

Additional Information

2

What will be the date span of the

initial transfer of records to the

National Archives?

How frequently will your agency

transfer these records to the

National Archives?

From 1990 To 1997

Every 1 Years

Research and Program Analysis: Supporting Records

Disposition Authority Number DAA-0440-2015-0009-0003

Records that support research and analysis of CMS programs, including systems used for analysis and reporting, demonstration and pilot records, and records related to participation in CMS-sponsored research projects.

Final Disposition

Temporary

Item Status

Active

Is this item media neutral?

Yes

Do any of the records covered by this item currently exist in electronic format(s) other than email and word processing? No

GRS or Superseded Authority

N1-440-04-01 / 1

Citation

N1-440-04-01 / 2 N1-440-04-01 / 3

N1-440-09-03 / 1/b

N1-440-09-10 / 2/a

N1-440-09-10 / 2/b

N1-440-09-15 / 2 N1-440-10-03 / 2

N1-440-11-02 / 1

N1-440-11-02 / 2

N1-440-11-04 / 1/a

N1-440-11-04 / 1/b

Disposition Instruction

Cutoff Instruction

Cutoff at the end of the calendar year.

Retention Period

Destroy 10 year(s) after cutoff or when no longer

needed for agency business occurs, whichever is

later

Additional Information

GAO Approval

Not Required



Agency Certification

I hereby certify that I am authorized to act for this agency in matters pertaining to the disposition of its records and that the records proposed for disposal in this schedule are not now needed for the business of the agency or will not be needed after the retention periods specified.

Signatory Information

Date	Action	Ву	Title	Organization
04/13/2015	Certify	Tony Tucker	Records Officer	Office of Strategic Operations and Regulatroy Affairs - OSORA
03/22/2017	Return for Revisio n	Sean Curry	Senior Appraisal Arc hivist	National Archives and Records Administration - Agency Services
03/27/2017	Return for Revisio	Sean Curry	Senior Appraisal Arc hivist	National Archives and Records Administration - Agency Services
03/28/2017	Submit For Certific ation	Carlos Simon	Records Officer	OSORA - IRISG
03/28/2017	Return to Submitte	Carlos Simon	Records Officer	OSORA - IRISG
03/29/2017	Submit For Certific ation	Carlos Simon	Records Officer	OSORA - IRISG
03/29/2017	Certify	Carlos Simon	Records Officer	OSORA - IRISG
07/06/2017	Submit for Concur rence	Sean Curry	Senior Appraisal Arc hivist	National Archives and Records Administration - Agency Services
07/11/2017	Concur	Margaret Hawkins	Director of Records Management Servic es	National Records Management Program - ACNR Records Management Serivces
07/11/2017	Concur	Margaret Hawkins	Director of Records Management Servic es	National Records Management Program - ACNR Records Management Serivces
07/13/2017	Approve	David Ferriero	Archivist of the Unite d States	Office of the Archivist - Office of the Archivist

DAA-0440-2015-0009

Bucket 7 - Research and Program Analysis Records

7A: Research and Program Analysis: Public Use, Statistical, and Summary Files Description: Records that formally document CMS programs and facilitate research. This includes records created to allow analysis of CMS program use, implementation, and outcomes. These public use, statistical, and summary files include those related to specific CMS programs such as Medicare Parts A and B, Medicare Part D, and Medicaid. Also included are research files for special areas of public interest, such as Chronic Conditions and physician costs; as well as general research files on overall expenditures and health care codes.

ALITUODITY ALLIMBED.	DAA-0440-2015-0009, ITEM 0001	
AUTHURITY NUMBER:	DAA-0440-2015-0009. N EW 0001	

Sub-bucket	Series	Superseded Series Title / Description	Original Authority	Original Retention	Office of Record	Change
7A1: Public Use Files and Reports (PUFs). Records created by CMS to support research and to document the efficiency of programs. Includes public use files (PUFs) created specifically for public use,	•	Annual Summary Report. CMS Publications that summarize the highlights of current spending and significant changes in spending and projections.	DAA-0440-2013-0006, item 0002	Permanent	Office of the Actuary.	No change.
primarily for research into utilization and implementation of all CMS programs. Includes datasets for public use and data manipulation, as well as static published reports based on CMS or third-party analysis. Includes those records that do not have access restrictions (see item 7A2 for records with any restrictions). PERMANENT, transfer when 5 years old. NOTE: many of the underlying systems used to create these records are scheduled separately within other buckets.		Data Files. Accumulation of electronic data that is used to provide statistical information to track economy and forecast growth In health care expenditures Includes historical and projected data from the National Health Expenditure Accounts including expenditures by source of funds (payer or program) and by type of service or product (goods and services) Data is cumulative data and analysis are conducted on an on-going basis and provide current annual estimates as well as revisions to prior years.	,	Permanent	Office of the Actuary.	No change.
Those retention periods should be followed for Master Files and other	Prescription Drug Utilization. Public use and summarized data files related to Medicare Part D (Prescription Drug Benefits), that provide summary data on program utilization and implementation.	Prescription Drug Event (PDE) Output Files - summary data of all annual prescription approvals; PDEs contain summary data related to all Medicare Part D expenditures, and include information on the patient (date of birth, gender), provider (identifier) and statistical information on the prescribed drug.	3a	Permanent	Office of Enterprise Data and Analytics	Reduction from 20 years transfer.

Medicare Program Utilization. Analytic records related to Medicare Parts A, B, and C, that provide data on program utilization and implementation.	Office of Medicare Cost Estimates. Medicare Actuarial Data Systems, data and documentation. Provides reports for actuarial analysis of Medicare programs used to estimate Part A tax rates and Part B Premium rates, including Part A bill tables, Part B provider bill tables, Part B payment tables, Part A stay record tables and aged and disabled enrollment/entitlement tables.	N1-440-93-03, item 1	Permanent	Office of the Actuary.	No change.
	Medicare Systems Branch, Bureau of Data Management. Medicare Automated Data Retrieval System (MADRS), data and documentation. The MADRS reorganizes and reduces the size of the claim files to provide a streamlined research data file and data retrieval system.	N1-440-93-03, item 2	Permanent		No change.
	Provider Reimbursement Review Board, Hearings and Decisions Staff. Medicare Decision Support System, data and documentation. The Medicare decision support system contains all the subsystems based on Medicare claims data that supply the Agency with statistical information that can be used for decision making.	N1-440-93-03, item 3	Permanent		No change.
Chronic Conditions. Public use related to chronic conditions.	Public Use File, Chronic Conditions. Public use files created to support studies requiring the use and analysis of Medicare data related to chronic conditions Currently known as "Chronic Condition PUF."		Permanent	Office of Enterprise Data and Analytics	No change.

lealth and Social Survey	Physician Practice Cost & Income Survey	N1-440-94-02, item 1	Permanent	Center for	No change.
Records. Health and social	(PPCIS). The PPCIS system contains data			Medicare	i
survey records, including	collected to develop a Geographic Cost Practice		į		
nformation on the cost of	Index, refine the cost share weights of the		ŀ		
providing medical care,	Medicare Economic Index, and evaluate Federal				
ncome, financial	Reimbursement of physicians participating in				
arrangements, alternative	Medicare and Medicaid. Includes a sample of				ľ
orms of practice, service	approximately 5,000 physicians who provide				ŀ
delivery, changes in physician-	patient care at least 20 hours per week in an				
nospital arrangements,	office or hospital setting, and who live in the 50				
participation in public	States and the District of Columbia. The data				
programs, and patient	include information on practice costs such as				
haracteristics. Records may	rent for space and equipment, employee		1		
also include physician socio-	salaries and compensation, malpractice				
demographic data, county-	insurance, physician gross and net income, and				
evel health care resources	related fees and costs.				
data, and hospital-level data.				l	ł
CMS conducts such surveys					
periodically. Includes	1				1
Geographic Practice Cost					
ndex, which are follow-up					
surveys to the PPCIS					
idiveys to the Freis				1	1
Health Care Common	Public Use Version of Annual Code Summary	N1-440-01-02, item	Permanent	Center for	Increase from
Procedure Codes	(electronic copy). Records of the Centers for	3c1b		Medicare	annual
	Medicare & Medicaid Services (CMS) created				transfer.
	and maintained for standardizing medical				
	procedure codes used nationwide to bill				
	physician/supplier products and services for	,			
	Medicare. Consists of Alpha-Numeric Common				
	Procedure Codes only that are published yearly				
	along with the added, changed and		Ì	}	
	discontinued codes.		ł		
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		1 -	N1-440-01-02, item 3d1 (note that CMS received authority for this item outside the GRS)	Permanent	Center for Medicare	Increase from annual transfer.
	Operational Studies: operational studies, including those lead by the Office of Research, Development, and information, pertaining to multiple areas of CMS program research.		SEE: BUCKET 1			
AUTHORITY NUMBER: DAA-0440-2	Reports to Congress: any formal reports routinely sent to Congress, or requested on an ad hoc basis, related to research and program analysis.		SEE: BUCKET 1			
7A2	Series	Superseded Series Title / Description	Original Authority	Original Retention	Office of Record	Change
7A2: Analytic and Research Files (Restricted): Records created by CMS to support research and to document the efficiency of programs. Includes research and analytic files created for research into utilization and implementation of all CMS programs. Includes datasets as well as static published reports based on CMS or third-party analysis. Includes those records that have access restrictions, primarily due to the inclusion of personally identifiable information (PII) (see item 7A1 for records without any restrictions). PERMANENT, transfer when 20 years old. NOTE: many of the underlying systems used to create		Standard Analytical Files (SAFs). Standard Analytical Flies (5% sampling), output flies (currently in CSV format) created annually by CMS for claims closed that fiscal year for Medicare Parts A and B. The 5% sample is created from the National Claims History (NCH) system as well as the Common Working Files (CWF) based on selecting records with 05, 20, 45, 70 or 95 in positions 8 and 9 of the Health Insurance Claim (HIC) number. Files currently date back to 1999, and includes the following individual files 1) Durable Medical Equipment, 2) Home Health Agency, 3) Hospice Care, 4) Inpatient Cares) Outpatient Care, 6) Physician/Supplier, and 7) Skilled Nursing Facility.	N1-440-09-10, item 3a	Permanent	Office of Enterprise Data and Analytics	No change.

separately within other buckets.	files related to Medicaid utilization, including summarized state-submitted data.	Medicald Analytic extract (MAX): research file extracted from the Medicald Statistical Information System (MSIS) used for program analysis and research. MAX contains multiple files, including one focused on enrollment and demographics, and four on program use (Inpatient care, long term care, other services, and prescription drug).	NEW	Permanent	Office of Enterprise Data and Analytics	n/a

AUTHORITY NUMBER: DAA-0440-2015-0009, ITEM 0003

7B: Research and Program Analysis: Supporting Records. Records that support research and analysis of CMS programs, including systems used for analysis and reporting, demonstration and pilot records, and records related to participation in CMS-sponsored research projects. Temporary, Destroy when 10 years old, but longer retention is authorized.

Sub-bucket	Series	Superseded Series Title / Description	Original Authority	Original Retention	Change
7B1: Analytic Records: Records	Medicare Utilization Data	Master Files, National Claims History (NCH):	N1-440-09-10, item	Temporary, 75	 Decrease
that are comprised of data	Collection and Access System	The current System of Record for all Medicare	2a	years	(setting a
consolidated from other CMS	(MUDCAS): A collection of	Part A and Part B utilization data. Function as			minimum of
systems and records to facilitate	automated systems that	CMS's repository of paid Medicare claims data			10 year
program analysis and research.	support the collection and	beginning with the service year 1991. The data			retention;
NOTE: this item does NOT include	analysis of Medicare and	from the NCH IS used for statistical and research		1	program office
formal reports, operational studies	Medicaid program enrollment	purposes related to evaluating/studying the			may retain
or public use files created as part	and utilization data on	operation and effectiveness of the Medicare		1	longer).
of analytical processes. See bucket	Medicare beneficiaries	program.			
1 for disposition of formal reports	enrolled in hospital insurance				
and studies. See bucket 7A for	(Part A) or medical Insurance				
public use and research files	(Part B) of the Medicare				
	l	L	l	<u> </u>	L

related to any LIVIS data-set.	program for statistical and	Master Files, National Medicare Utilization	N1-440-09-10, item	Temporary, 30	Decrease
	research purposes related to	Database (NMUD): A derivative of NCH, the	2b	years	(setting a
	evaluating and studying the	data warehouse was implemented to take			minimum of
	operation and effectiveness of	advantage of storing Medicare claims data			10 year
	the Medicare program.	beginning in 1998. It houses granular-level,			retention;
		beneficiary-specific detail data in relational			program office
		database tables. NMUD contains billing and use			may retain
		data on Medicare beneficiaries enrolled In			longer).
		hospital Insurance (Part A) and/or medical		1	
		Insurance (Part B) under the fee-for-service			
		program, which is used for statistical and			
1		research purposes related to			
		evaluating/studying the operation and			
		effectiveness of the Medicare program.			
		, -			
	1				

Master Files, Medicare Provider Analysis and	N1-440-09-10, item	Temporary, 30		No change in
Review Systems (MEDPAR): CMS's repository	2b	years		final
of beneficiary data beginning with service year				disposition;
1992. MEDPAR maintains information on				CMS may
inpatient and hospital and Skilled Nursing				reduce
Facility (SNF) stays of Medicare beneficiaries				retention to
(Part A). The primary purpose of the MEDPAR is				10 years, but
to enable CMS and Its contractors to facilitate				has flexibility
research on the quality and effectiveness of care				to keep
provided, update annual hospital Prospective				individual
Payment System (PPS) rates, and to recalculate			,	series longer
Supplemental Security Income (SSI) ratios for				as required by
hospitals that are paid under the Increased				business
reimbursement under Part A of the Medicare				needs.
program. Information retrieved from this file is				
also disclosed to support regulatory,				
reimbursement, and policy functions performed				
within the Agency or by a contractor or		•		
consultant, supporting litigation involving the				
Agency, and combating fraud and abuse In				
certain health benefit programs.				
		1		

Master Files, Incurred But Not Reported (IBNR)	N1-440-09-10, item	Temporary, 30	 No change in
System: contains summarized and individually	2b	years	final
identifiable claim level Medicare claims			disposition;
information. The data is based on the date the			CMS may
cost for Medicare services was incurred and the			reduce
date the payment for those services was			retention to
authorized. The data is used as the basis for			10 years, but
estimating other Governmental Liabilities			has flexibility
reported on the Balance Sheet and to provide a			to keep
sample of the granular data to OFM auditors. It			individual
supports the Office of Financial Management's	ł		series longer
Annual report that supports establishment of			as required by
Medicare claims liability by reviewing all claims			business
paid for services rendered over the previous			needs.
three years up to services rendered and			
received no later than September 30 of the			ļ ·
current year.			-
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Integrated Data Repository	Master Files	N1-440-09-15, item 2	Temporary, 75	 No change in
(Master File): An enterprise			years	final
resource that will provide one			,	disposition;
integrated view of all CMS data				CMS may
to administer the Medicare				reduce
and Medicaid Programs,				retention to
specifically the Medicare Part D				10 years, but
(prescription drug) Program.		1	:	has flexibility
The applications consist of				to keep
Medicare Parts A, B, C and D				individual
entitlement, enrollment and				series longer
utilization data to validate Part				as required by
D eligibility and other data,				business
enrollment of individuals in the				needs.
drug benefit or subsidy				
assistance programs, pay				
prescription drug plans,				
evaluate the quality of the new				
prescription drug benefit,				
support drug research, provide		1		
better access to data and		l		
provide opportunities for other				
government and research				
organizations to Improve		İ		
health care for the public.		ļ		
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		}	ľ	
Health Care Quality	Master Files, Consolidated Renal Operations in	N1-440-09-03. item	Temporary, 10	 No change.
Improvement	a Web-Enabled Environment (CROWN):	1b	vears	
System/Records. A collection	Facilitates the collection and maintenance of	1	[
of automated systems that	information about the Medicare End Stage			1
facilitate the collaboration of	Renal Disease (ESRD) program, its beneficiaries			
CMS and the Quality	and the services provided to beneficiaries.		1	
Improvement Organizations				
(QIO) to monitor and improve				
utilization and quality of care				

Judilizacion and quanty of care for Medicare and Medicaid beneficiates. Records include but not limited to: 1) survey data from providers; 2) Certification and assessment data from ESRD providers; 3) ESRD patient and provider information; 4) Summarized data for payment error rates; 5) data on approximately 4000 dialysis facilities in the U S; 6) Patient assessment data; 7) Quality Indicatory Report; 8) Clinical information on patients in nursing homes; and 9) Financial incentives for eligible professionals to participate in a voluntary quality-reporting program.

	Files, Quality Improvement and	N1-440-09-03, item	Temporary, 10		No change.
	tion System (QIES): provides states and	1b	years		
	ith the ability to use performance				
1	ation to enhance onsite inspection				
	es, monitor quality of care, and facilitate				
	ers' efforts related to continuous quality				
1 '	ement. Includes summarized data for				
perform	nt error rates, and related to provider				
periorii	nance.				
)					
Master	Files, Physician Quality Reporting	N1-440-09-03, item	Temporary, 10		No change.
	/e (PQRI): Collects and maintains	1b	vears		No change.
	ually identifiable information for all	**	, years		
	professionals who voluntarily participate				
	QRI Eligible professionals report on a				
	ated set of quality measures for services				
_	der the traditional fee-for-service				
1.	m. The information includes but not		1		
-	to name, address, phone number, social				
	number, taxpayer ID number, unique				
_	an ID number, (UPIN) and National				
	er Identifier (NPI). Patient health				
	ation for provider patients will include,				
	ot limited to Health Insurance Claims				
Numbe	r and social security number.				
	·			1	
			<u> </u>		
	Files, Standard Data Processing System	N1-440-09-03, item	Temporary, 10		No change.
	Consists of many data and reporting	1b	years		
	ments that have been designed and	_		,	
	ped in response to the ongoing ADP	`			
1 .	ments of the various QIOs and other				
	ed partners to fulfill its contractual				
1 -	ments with CMS. Provides individual				
	I records, aggregate medical data, clinical				
	d financial data related to medical				
claims.					

Master Files, Quality Improvement Initiative	N1-440-09-03, item	Temporary, 10	No change.
(QII): Assists Medicare beneficiaries and their	1b	years	
caregivers by promoting the availability of			·
quality measures, helping to ensure they	1		
understand what the measures mean, and		1	
encouraging them to use the measures as part		1	
of their health care decision-making process, QII	1	1 1	
will assist Medicare beneficiaries and their			
caregivers by promoting the availability of the		1	
quality measures, helping to ensure they			
understand what the measures mean, and	1		
encouraging them to use the measures as part			
of their health care decision-making process.			
		1	

] [Medicaid Statistical	Master Files	NEW	n/a		n/a
	Information System (MSIS):					
	Evaluates state submitted tape					}
1	files of Medical eligibility and					
	claims data (inpatient, long					
	term care, prescription drug					
1	and other claims) and					
1	produces the MSIS "valid files"					
	which represent edited data					
	Provides unique views of				•	
	Medicaid data at are easier to	-				
	use for many research and					
	policy analysts applications,					
	selected eligibility/demo alpha					
	data are added to each MSIS					ľ
	record so users need no link					
	back to eligibility files for all					ŀ
- I	uses, integrity data are					
	augmented with a summary of					
1	Medicaid payments and					
	utilization for selected types of					
	services for each eligible					
	individual which results as a		1			l i
	MSIS Annual Personal					1
	Summary File for each state					
	and year.					
						l
7B2: Demonstration, pilots, and	Demonstrations, Pilots and	Pilot projects - Administrative: systems	N1-440-11-02, item 1	Temporary, 5		Increase.
models: records related to	Models Records	developed to streamline or to study the		years		
demonstrations and pilots carried	1	streamlining of administrative functions of CMS				
out by CMS and its contractors on		Records/data may include but are not limited to]
a variety of topics. Used primarily	1	forms, data				
to test new methods and	ł	input, applications, charts, reports,				
processes. Final reports of any	1	correspondence, etc.				
such project are captured as	1	I .	I		i	

permanent in bucket 1. NOTE: other grant-related records are covered by the General Records Schedule (GRS) for grant and agreement records.

Pilot Projects - Program related: systems developed to conduct research, streamline or to study the streamlining of program functions of CMS before they are considered for conversion to CMS-related programs Records/data may include but are not limited to data from Medicare contractors, beneficiaries, States, providers of services (physicians, hospitals, state agencies, etc.), applications, reports, correspondence, etc.		Temporary, 10 years	No change.
Formal demonstration/pilot, when demonstration never occurred.	N1-440-11-04, item 1b	Temporary, 5 years	Increase.
When pilot/demonstration is completed. Media-neutral collection of information (paper, electronic and other formats) that supports the management evaluation, and payment of the demonstration project Includes but is not limited to Award letter, cost reports, financial statements, correspondence, progress reports, corrective actions, site visit reports, contract and MODs, invoices, COTR Training documentation and certifications, copy of interim and final reports, desk review programs, notices of program reimbursement, adjustment reports, appeals information (e g, position papers), payment information, enrollee data, monthly and history edits, etc.	N1-440-11-04, item 1a	Temporary, 10 years	No change.

Personal Health Care (PHR) Pilot. offered to fee-	N1-440-10-03, item 2	Temporary, 10	-	No change.	7
for-service (FFS) beneficiaries in selected states		years		1	ı
which provides FFS beneficiaries with free					ı
access to a COTS electronic PHR. The purpose of		Ì		ł	L
the system is to study the uptake and utilization					ı
of a PHR to help Medicare develop the					ı
requirements for a Medicare-compliant PHR.				į	ı
Pilots Include, but not limited to: MyPHRSC (My					ı
Personal Heath Record - South Carolina); and					ı
PHR Choice. pilot for those living In Arizona and		1			ı
Utah.					
					4
Electronic Health Records Demonstration System	NEW	n/a		n/a	
Million Heart Data Registry Model). All records related to the Million Heart Model, including	NEW	n/a		n/a	$\frac{1}{1}$
the data registry (MHDR). The registry supports the program's clinical implementation, it collects and processes data from multiple entry points, and feeds outputs to multiple business processes and platforms. The data from the MHDR system is utilized for beneficiary enrollment, validation, adjudication and alignment for participating practices.					
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Oncology Care Model. All records related to Oncology Care Model, including registry (OCMR). The Oncology Care Model Data Registry (OCMR) is a specialized registry. It supports the Oncology Care payment model and is designed to test the effect of better care	NEW	n/a		n/a	
coordination. The OCMR is designed as a web based single page application.					

7B3: Research Participation:	Research Participation	Expert File: Interchange of (Grants, Research	NEW	NEW	 n/a
records related to participation in	Records	and Demonstration), Case files on foreign and			
CMS research projects.		U.S. research participants; participating in			
		interchange fellowship programs, etc.			•
		Consent forms: Signed by a Medicare	N1-440-04-01, item 1	Temporary, 2	 Increase.
		beneficiary consenting to: the Interview being		years	
		audio/video taped, the Information collected			
		being for research purposes, and their names			ļ
		not tied to any results.			
		Consent background files: Records created	N1-440-04-01, item 3	Temporary, 2	 Increase.
		while developing report. Files may include	·	years	ļ
		reference materials, drafts that are circulated			į
		for Internal discussion, copies of meeting notes,			
		briefing materials, reference papers, diagrams,			
		data used from tables and surveys, interim			
		reports, and other materials used to create and			
		support results/final report file.			
		Audio / Video Tapes of Interviews with	N1-440-04-01, item 2	Temporary, 2	Increase.
		Beneficiaries	1	years	