

Restricted-use Linked NCHS-CMS Medicare Data
Master Beneficiary Summary File: Part D
DATE CREATED: 02FEB2017
Number of Variables: 83

Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
SURVEY	NCHS SURVEY NAME	Char	20	-	
PUBLICID	NHIS PUBLIC USE ID	Char	14	ID	
SEQN	NHANES SAMPLE SEQUENCE NUMBER (PUBLIC ID)	Num	8	ID	
RESNUM	NNHS RESIDENT ID NUMBER (PUBLIC)	Num	8	ID	
PATNUM	Patient/Discharge Record (Case) Number in public-use file	Num	8	ID	
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)	Num	4	2006-2013	
BENE_ENROLLMT_REF_YR	Beneficiary Enrollment Reference Year	Num	4	2006-2013	
CRDTBL_CVRG_SW	Creditable Coverage Switch	Char	1		Missing Value
				*	Enrolled in Medicare A and/or B, no Part D enrollment data for the bene
				0	No instances of any creditable cov status switch being ON at any point during the year
				1	For at least 1 month during the year, 1 out of 5 creditable cov switches was ON
				X	Enrolled in Medicare A and/or B, no Part D enrollment data for the bene
PLAN_CVRG_MOS_NUM	Plan Coverage Months Number	Char	2		Missing Value
				00	0 Months Covered
				01	1 Month Covered
				02	2 Months Covered
				03	3 Months Covered
				04	4 Months Covered
				05	5 Months Covered

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				06	6 Months Covered
				07	7 Months Covered
				08	8 Months Covered
				09	9 Months Covered
				10	10 Months Covered
				11	11 Months Covered
				12	12 Months Covered
RDS_CVRG_MOS_NUM	Retiree Drug Subsidy Coverage Months Number	Char	2		Missing Value
				00	0 Months Covered
				01	1 Month Covered
				02	2 Months Covered
				03	3 Months Covered
				04	4 Months Covered
				05	5 Months Covered
				06	6 Months Covered
				07	7 Months Covered
				08	8 Months Covered
				09	9 Months Covered
				10	10 Months Covered
				11	11 Months Covered
				12	12 Months Covered
DUAL_ELGBL_MOS_NUM	Dual Eligible Months Number	Char	2		Missing Value
				00	0 Months Covered

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				01	1 Month Covered
				02	2 Months Covered
				03	3 Months Covered
				04	4 Months Covered
				05	5 Months Covered
				06	6 Months Covered
				07	7 Months Covered
				08	8 Months Covered
				09	9 Months Covered
				10	10 Months Covered
				11	11 Months Covered
				12	12 Months Covered
PTD_CNTRCT_ID_01	Jan. Contract ID	Char	5	-	
PTD_CNTRCT_ID_02	Feb. Contract ID	Char	5	-	
PTD_CNTRCT_ID_03	Mar. Contract ID	Char	5	-	
PTD_CNTRCT_ID_04	Apr. Contract ID	Char	5	-	
PTD_CNTRCT_ID_05	May Contract ID	Char	5	-	
PTD_CNTRCT_ID_06	Jun. Contract ID	Char	5	-	
PTD_CNTRCT_ID_07	Jul. Contract ID	Char	5	-	

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
PTD_CNTRCT_ID_08	Aug. Contract ID	Char	5	-	
PTD_CNTRCT_ID_09	Sep. Contract ID	Char	5	-	
PTD_CNTRCT_ID_10	Oct. Contract ID	Char	5	-	
PTD_CNTRCT_ID_11	Nov. Contract ID	Char	5	-	
PTD_CNTRCT_ID_12	Dec. Contract ID	Char	5	-	
PTD_PBP_ID_01	Jan. Plan Benefit Package ID	Char	3	-	
PTD_PBP_ID_02	Feb. Plan Benefit Package ID	Char	3	-	
PTD_PBP_ID_03	Mar. Plan Benefit Package ID	Char	3	-	
PTD_PBP_ID_04	Apr. Plan Benefit Package ID	Char	3	-	
PTD_PBP_ID_05	May Plan Benefit Package ID	Char	3	-	
PTD_PBP_ID_06	Jun. Plan Benefit Package ID	Char	3	-	
PTD_PBP_ID_07	Jul. Plan Benefit Package ID	Char	3	-	
PTD_PBP_ID_08	Aug. Plan Benefit Package ID	Char	3	-	
PTD_PBP_ID_09	Sep. Plan Benefit Package ID	Char	3	-	
PTD_PBP_ID_10	Oct. Plan Benefit Package ID	Char	3	-	

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
PTD_PBP_ID_11	Nov. Plan Benefit Package ID	Char	3	-	
PTD_PBP_ID_12	Dec. Plan Benefit Package ID	Char	3	-	
PTD_SGMT_ID_01	Jan. Segment ID	Char	3	-	
PTD_SGMT_ID_02	Feb. Segment ID	Char	3	-	
PTD_SGMT_ID_03	Mar. Segment ID	Char	3	-	
PTD_SGMT_ID_04	Apr. Segment ID	Char	3	-	
PTD_SGMT_ID_05	May Segment ID	Char	3	-	
PTD_SGMT_ID_06	Jun. Segment ID	Char	3	-	
PTD_SGMT_ID_07	Jul. Segment ID	Char	3	-	
PTD_SGMT_ID_08	Aug. Segment ID	Char	3	-	
PTD_SGMT_ID_09	Sep. Segment ID	Char	3	-	
PTD_SGMT_ID_10	Oct. Segment ID	Char	3	-	
PTD_SGMT_ID_11	Nov. Segment ID	Char	3	-	
PTD_SGMT_ID_12	Dec. Segment ID	Char	3	-	
CST_SHR_GRP_CD_01	Jan. Cost Share Group Code	Char	2		Missing Value
				**	Enrolled in Medicare A and/or B, but no D enrollment data for the bene

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				00	Not Medicare enrolled for the month
				01	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and no copay
				02	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and low copay
				03	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and high copay
				04	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and high copay
				05	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and 15% copay
				06	in Parts A and/or B, and D; enrol LIS with 75% prem subsidy and 15% copay
				07	in Parts A and/or B, and D; enrol LIS with 50% prem subsidy and 15% copay
				08	in Parts A and/or B, and D; enrol LIS with 25% prem subsidy and 15% copay
				09	in Parts A and/or B, and D; no premium or cost sharing subsidy
				10	in Parts A and/or B, not D; employer receives RDS subsidy
				11	in Parts A and/or B, not D; creditable cov from plan doesnt receive RDS subsidy
				12	in Parts A and/or B, not D; not in an RDS plan and no creditable coverage
CST_SHR_GRP_CD_02	Feb. Cost Share Group Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and no copay
				02	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and low copay
				03	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and high copay
				04	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and high copay
				05	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and 15% copay
				06	in Parts A and/or B, and D; enrol LIS with 75% prem subsidy and 15% copay
				07	in Parts A and/or B, and D; enrol LIS with 50% prem subsidy and 15% copay
				08	in Parts A and/or B, and D; enrol LIS with 25% prem subsidy and 15% copay
				09	in Parts A and/or B, and D; no premium or cost sharing subsidy

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				10	in Parts A and/or B, not D; employer receives RDS subsidy
				11	in Parts A and/or B, not D; creditable cov from plan doesnt receive RDS subsidy
				12	in Parts A and/or B, not D; not in an RDS plan and no creditable coverage
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
CST_SHR_GRP_CD_03	Mar. Cost Share Group Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and no copay
				02	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and low copay
				03	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and high copay
				04	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and high copay
				05	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and 15% copay
				06	in Parts A and/or B, and D; enrol LIS with 75% prem subsidy and 15% copay
				07	in Parts A and/or B, and D; enrol LIS with 50% prem subsidy and 15% copay
				08	in Parts A and/or B, and D; enrol LIS with 25% prem subsidy and 15% copay
				09	in Parts A and/or B, and D; no premium or cost sharing subsidy
				10	in Parts A and/or B, not D; employer receives RDS subsidy
				11	in Parts A and/or B, not D; creditable cov from plan doesnt receive RDS subsidy
				12	in Parts A and/or B, not D; not in an RDS plan and no creditable coverage
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
CST_SHR_GRP_CD_04	Apr. Cost Share Group Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and no copay
				02	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and low copay

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				03	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and high copay
				04	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and high copay
				05	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and 15% copay
				06	in Parts A and/or B, and D; enrol LIS with 75% prem subsidy and 15% copay
				07	in Parts A and/or B, and D; enrol LIS with 50% prem subsidy and 15% copay
				08	in Parts A and/or B, and D; enrol LIS with 25% prem subsidy and 15% copay
				09	in Parts A and/or B, and D; no premium or cost sharing subsidy
				10	in Parts A and/or B, not D; employer receives RDS subsidy
				11	in Parts A and/or B, not D; creditable cov from plan doesnt receive RDS subsidy
				12	in Parts A and/or B, not D; not in an RDS plan and no creditable coverage
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
CST_SHR_GRP_CD_05	May Cost Share Group Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and no copay
				02	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and low copay
				03	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and high copay
				04	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and high copay
				05	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and 15% copay
				06	in Parts A and/or B, and D; enrol LIS with 75% prem subsidy and 15% copay
				07	in Parts A and/or B, and D; enrol LIS with 50% prem subsidy and 15% copay
				08	in Parts A and/or B, and D; enrol LIS with 25% prem subsidy and 15% copay
				09	in Parts A and/or B, and D; no premium or cost sharing subsidy
				10	in Parts A and/or B, not D; employer receives RDS subsidy
				11	in Parts A and/or B, not D; creditable cov from plan doesnt receive RDS subsidy

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				12	in Parts A and/or B, not D; not in an RDS plan and no creditable coverage
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
CST_SHR_GRP_CD_06	Jun. Cost Share Group Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and no copay
				02	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and low copay
				03	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and high copay
				04	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and high copay
				05	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and 15% copay
				06	in Parts A and/or B, and D; enrol LIS with 75% prem subsidy and 15% copay
				07	in Parts A and/or B, and D; enrol LIS with 50% prem subsidy and 15% copay
				08	in Parts A and/or B, and D; enrol LIS with 25% prem subsidy and 15% copay
				09	in Parts A and/or B, and D; no premium or cost sharing subsidy
				10	in Parts A and/or B, not D; employer receives RDS subsidy
				11	in Parts A and/or B, not D; creditable cov from plan doesnt receive RDS subsidy
				12	in Parts A and/or B, not D; not in an RDS plan and no creditable coverage
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
CST_SHR_GRP_CD_07	Jul. Cost Share Group Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and no copay
				02	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and low copay
				03	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and high copay
				04	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and high copay

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				05	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and 15% copay
				06	in Parts A and/or B, and D; enrol LIS with 75% prem subsidy and 15% copay
				07	in Parts A and/or B, and D; enrol LIS with 50% prem subsidy and 15% copay
				08	in Parts A and/or B, and D; enrol LIS with 25% prem subsidy and 15% copay
				09	in Parts A and/or B, and D; no premium or cost sharing subsidy
				10	in Parts A and/or B, not D; employer receives RDS subsidy
				11	in Parts A and/or B, not D; creditable cov from plan doesnt receive RDS subsidy
				12	in Parts A and/or B, not D; not in an RDS plan and no creditable coverage
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
CST_SHR_GRP_CD_08	Aug. Cost Share Group Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and no copay
				02	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and low copay
				03	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and high copay
				04	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and high copay
				05	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and 15% copay
				06	in Parts A and/or B, and D; enrol LIS with 75% prem subsidy and 15% copay
				07	in Parts A and/or B, and D; enrol LIS with 50% prem subsidy and 15% copay
				08	in Parts A and/or B, and D; enrol LIS with 25% prem subsidy and 15% copay
				09	in Parts A and/or B, and D; no premium or cost sharing subsidy
				10	in Parts A and/or B, not D; employer receives RDS subsidy
				11	in Parts A and/or B, not D; creditable cov from plan doesnt receive RDS subsidy
				12	in Parts A and/or B, not D; not in an RDS plan and no creditable coverage
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
CST_SHR_GRP_CD_09	Sep. Cost Share Group Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and no copay
				02	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and low copay
				03	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and high copay
				04	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and high copay
				05	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and 15% copay
				06	in Parts A and/or B, and D; enrol LIS with 75% prem subsidy and 15% copay
				07	in Parts A and/or B, and D; enrol LIS with 50% prem subsidy and 15% copay
				08	in Parts A and/or B, and D; enrol LIS with 25% prem subsidy and 15% copay
				09	in Parts A and/or B, and D; no premium or cost sharing subsidy
				10	in Parts A and/or B, not D; employer receives RDS subsidy
				11	in Parts A and/or B, not D; creditable cov from plan doesnt receive RDS subsidy
				12	in Parts A and/or B, not D; not in an RDS plan and no creditable coverage
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
CST_SHR_GRP_CD_10	Oct. Cost Share Group Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and no copay
				02	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and low copay
				03	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and high copay
				04	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and high copay
				05	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and 15% copay
				06	in Parts A and/or B, and D; enrol LIS with 75% prem subsidy and 15% copay

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				07	in Parts A and/or B, and D; enrol LIS with 50% prem subsidy and 15% copay
				08	in Parts A and/or B, and D; enrol LIS with 25% prem subsidy and 15% copay
				09	in Parts A and/or B, and D; no premium or cost sharing subsidy
				10	in Parts A and/or B, not D; employer receives RDS subsidy
				11	in Parts A and/or B, not D; creditable cov from plan doesnt receive RDS subsidy
				12	in Parts A and/or B, not D; not in an RDS plan and no creditable coverage
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
CST_SHR_GRP_CD_11	Nov. Cost Share Group Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and no copay
				02	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and low copay
				03	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and high copay
				04	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and high copay
				05	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and 15% copay
				06	in Parts A and/or B, and D; enrol LIS with 75% prem subsidy and 15% copay
				07	in Parts A and/or B, and D; enrol LIS with 50% prem subsidy and 15% copay
				08	in Parts A and/or B, and D; enrol LIS with 25% prem subsidy and 15% copay
				09	in Parts A and/or B, and D; no premium or cost sharing subsidy
				10	in Parts A and/or B, not D; employer receives RDS subsidy
				11	in Parts A and/or B, not D; creditable cov from plan doesnt receive RDS subsidy
				12	in Parts A and/or B, not D; not in an RDS plan and no creditable coverage
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
CST_SHR_GRP_CD_12	Dec. Cost Share Group Code	Char	2		Missing Value

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				00	Not Medicare enrolled for the month
				01	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and no copay
				02	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and low copay
				03	in Parts A and/or B, and D; elig LIS with 100% prem subsidy and high copay
				04	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and high copay
				05	in Parts A and/or B, and D; enrol LIS with 100% prem subsidy and 15% copay
				06	in Parts A and/or B, and D; enrol LIS with 75% prem subsidy and 15% copay
				07	in Parts A and/or B, and D; enrol LIS with 50% prem subsidy and 15% copay
				08	in Parts A and/or B, and D; enrol LIS with 25% prem subsidy and 15% copay
				09	in Parts A and/or B, and D; no premium or cost sharing subsidy
				10	in Parts A and/or B, not D; employer receives RDS subsidy
				11	in Parts A and/or B, not D; creditable cov from plan doesnt receive RDS subsidy
				12	in Parts A and/or B, not D; not in an RDS plan and no creditable coverage
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
RDS_IND_01	Jan. RDS Code - Retiree Drug Subsidy Code	Char	1		Missing Value
				*	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
				0	Not Medicare enrolled for the month
				N	No employer subsidization for the retired beneficiary
				Y	Employer subsidized for the retired beneficiary
RDS_IND_02	Feb. RDS Code - Retiree Drug Subsidy Code	Char	1		Missing Value
				0	Not Medicare enrolled for the month
				N	No employer subsidization for the retired beneficiary
				X	Enrolled in Medicare A and/or B, but no D enrollment data for the bene

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				Y	Employer subsidized for the retired beneficiary
RDS_IND_03	Mar. RDS Code - Retiree Drug Subsidy Code	Char	1		Missing Value
				0	Not Medicare enrolled for the month
				N	No employer subsidization for the retired beneficiary
				X	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
				Y	Employer subsidized for the retired beneficiary
RDS_IND_04	Apr. RDS Code - Retiree Drug Subsidy Code	Char	1		Missing Value
				0	Not Medicare enrolled for the month
				N	No employer subsidization for the retired beneficiary
				X	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
				Y	Employer subsidized for the retired beneficiary
RDS_IND_05	May RDS Code - Retiree Drug Subsidy Code	Char	1		Missing Value
				0	Not Medicare enrolled for the month
				N	No employer subsidization for the retired beneficiary
				X	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
				Y	Employer subsidized for the retired beneficiary
RDS_IND_06	Jun. RDS Code - Retiree Drug Subsidy Code	Char	1		Missing Value
				0	Not Medicare enrolled for the month
				N	No employer subsidization for the retired beneficiary
				X	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
				Y	Employer subsidized for the retired beneficiary

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
RDS_IND_07	Jul. RDS Code - Retiree Drug Subsidy Code	Char	1		Missing Value
				0	Not Medicare enrolled for the month
				N	No employer subsidization for the retired beneficiary
				X	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
				Y	Employer subsidized for the retired beneficiary
RDS_IND_08	Aug. RDS Code - Retiree Drug Subsidy Code	Char	1		Missing Value
				0	Not Medicare enrolled for the month
				N	No employer subsidization for the retired beneficiary
				X	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
				Y	Employer subsidized for the retired beneficiary
RDS_IND_09	Sep. RDS Code - Retiree Drug Subsidy Code	Char	1		Missing Value
				0	Not Medicare enrolled for the month
				N	No employer subsidization for the retired beneficiary
				X	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
				Y	Employer subsidized for the retired beneficiary
RDS_IND_10	Oct. RDS Code - Retiree Drug Subsidy Code	Char	1		Missing Value
				0	Not Medicare enrolled for the month
				N	No employer subsidization for the retired beneficiary
				X	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
				Y	Employer subsidized for the retired beneficiary
RDS_IND_11	Nov. RDS Code - Retiree Drug Subsidy Code	Char	1		Missing Value
				0	Not Medicare enrolled for the month

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				N	No employer subsidization for the retired beneficiary
				X	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
				Y	Employer subsidized for the retired beneficiary
RDS_IND_12	Dec. RDS Code - Retiree Drug Subsidy Code	Char	1		Missing Value
				0	Not Medicare enrolled for the month
				N	No employer subsidization for the retired beneficiary
				X	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
				Y	Employer subsidized for the retired beneficiary
DUAL_STUS_CD_01	Jan. Dual Status Code	Char	2		Missing Value
				**	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
				00	Not Medicare enrolled for the month
				01	Qualified Medicare Beneficiary (QMB)-only
				02	QMB and full Medicaid coverage, including presc. drugs
				03	Specified Low-Income Medicare Beneficiary (SLMB)-only
				04	SLMB and full Medicaid coverage, including presc. drugs
				05	Qualified Disabled Working Individual (QDWI)
				06	Qualifying individuals (QI)
				08	Other dual eligible with full Medicaid coverage, including presc. drugs
				09	Other dual eligible, but without Medicaid coverage
				99	Unknown
				NA	Non-Medicaid
DUAL_STUS_CD_02	Feb. Dual Status Code	Char	2		Missing Value

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Number of Variables: 83

Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				00	Not Medicare enrolled for the month
				01	Qualified Medicare Beneficiary (QMB)-only
				02	QMB and full Medicaid coverage, including presc. drugs
				03	Specified Low-Income Medicare Beneficiary (SLMB)-only
				04	SLMB and full Medicaid coverage, including presc. drugs
				05	Qualified Disabled Working Individual (QDWI)
				06	Qualifying individuals (QI)
				08	Other dual eligible with full Medicaid coverage, including presc. drugs
				09	Other dual eligible, but without Medicaid coverage
				99	Unknown
				NA	Non-Medicaid
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
DUAL_STUS_CD_03	Mar. Dual Status Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	Qualified Medicare Beneficiary (QMB)-only
				02	QMB and full Medicaid coverage, including presc. drugs
				03	Specified Low-Income Medicare Beneficiary (SLMB)-only
				04	SLMB and full Medicaid coverage, including presc. drugs
				05	Qualified Disabled Working Individual (QDWI)
				06	Qualifying individuals (QI)
				08	Other dual eligible with full Medicaid coverage, including presc. drugs
				09	Other dual eligible, but without Medicaid coverage
				99	Unknown
				NA	Non-Medicaid

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
DUAL_STUS_CD_04	Apr. Dual Status Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	Qualified Medicare Beneficiary (QMB)-only
				02	QMB and full Medicaid coverage, including presc. drugs
				03	Specified Low-Income Medicare Beneficiary (SLMB)-only
				04	SLMB and full Medicaid coverage, including presc. drugs
				05	Qualified Disabled Working Individual (QDWI)
				06	Qualifying individuals (QI)
				08	Other dual eligible with full Medicaid coverage, including presc. drugs
				09	Other dual eligible, but without Medicaid coverage
				99	Unknown
				NA	Non-Medicaid
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
DUAL_STUS_CD_05	May Dual Status Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	Qualified Medicare Beneficiary (QMB)-only
				02	QMB and full Medicaid coverage, including presc. drugs
				03	Specified Low-Income Medicare Beneficiary (SLMB)-only
				04	SLMB and full Medicaid coverage, including presc. drugs
				05	Qualified Disabled Working Individual (QDWI)
				06	Qualifying individuals (QI)
				08	Other dual eligible with full Medicaid coverage, including presc. drugs

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				09	Other dual eligible, but without Medicaid coverage
				99	Unknown
				NA	Non-Medicaid
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
DUAL_STUS_CD_06	Jun. Dual Status Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	Qualified Medicare Beneficiary (QMB)-only
				02	QMB and full Medicaid coverage, including presc. drugs
				03	Specified Low-Income Medicare Beneficiary (SLMB)-only
				04	SLMB and full Medicaid coverage, including presc. drugs
				05	Qualified Disabled Working Individual (QDWI)
				06	Qualifying individuals (QI)
				08	Other dual eligible with full Medicaid coverage, including presc. drugs
				09	Other dual eligible, but without Medicaid coverage
				99	Unknown
				NA	Non-Medicaid
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
DUAL_STUS_CD_07	Jul. Dual Status Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	Qualified Medicare Beneficiary (QMB)-only
				02	QMB and full Medicaid coverage, including presc. drugs
				03	Specified Low-Income Medicare Beneficiary (SLMB)-only
				04	SLMB and full Medicaid coverage, including presc. drugs

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				05	Qualified Disabled Working Individual (QDWI)
				06	Qualifying individuals (QI)
				08	Other dual eligible with full Medicaid coverage, including presc. drugs
				09	Other dual eligible, but without Medicaid coverage
				99	Unknown
				NA	Non-Medicaid
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
DUAL_STUS_CD_08	Aug. Dual Status Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	Qualified Medicare Beneficiary (QMB)-only
				02	QMB and full Medicaid coverage, including presc. drugs
				03	Specified Low-Income Medicare Beneficiary (SLMB)-only
				04	SLMB and full Medicaid coverage, including presc. drugs
				05	Qualified Disabled Working Individual (QDWI)
				06	Qualifying individuals (QI)
				08	Other dual eligible with full Medicaid coverage, including presc. drugs
				09	Other dual eligible, but without Medicaid coverage
				99	Unknown
				NA	Non-Medicaid
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
DUAL_STUS_CD_09	Sep. Dual Status Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	Qualified Medicare Beneficiary (QMB)-only

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				02	QMB and full Medicaid coverage, including presc. drugs
				03	Specified Low-Income Medicare Beneficiary (SLMB)-only
				04	SLMB and full Medicaid coverage, including presc. drugs
				05	Qualified Disabled Working Individual (QDWI)
				06	Qualifying individuals (QI)
				08	Other dual eligible with full Medicaid coverage, including presc. drugs
				09	Other dual eligible, but without Medicaid coverage
				99	Unknown
				NA	Non-Medicaid
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
DUAL_STUS_CD_10	Oct. Dual Status Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	Qualified Medicare Beneficiary (QMB)-only
				02	QMB and full Medicaid coverage, including presc. drugs
				03	Specified Low-Income Medicare Beneficiary (SLMB)-only
				04	SLMB and full Medicaid coverage, including presc. drugs
				05	Qualified Disabled Working Individual (QDWI)
				06	Qualifying individuals (QI)
				08	Other dual eligible with full Medicaid coverage, including presc. drugs
				09	Other dual eligible, but without Medicaid coverage
				99	Unknown
				NA	Non-Medicaid
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene

Restricted-use Linked NCHS-CMS Medicare Data
Master Beneficiary Summary File: Part D
DATE CREATED: 02FEB2017
Number of Variables: 83

Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
DUAL_STUS_CD_11	Nov. Dual Status Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	Qualified Medicare Beneficiary (QMB)-only
				02	QMB and full Medicaid coverage, including presc. drugs
				03	Specified Low-Income Medicare Beneficiary (SLMB)-only
				04	SLMB and full Medicaid coverage, including presc. drugs
				05	Qualified Disabled Working Individual (QDWI)
				06	Qualifying individuals (QI)
				08	Other dual eligible with full Medicaid coverage, including presc. drugs
				09	Other dual eligible, but without Medicaid coverage
				99	Unknown
				NA	Non-Medicaid
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene
DUAL_STUS_CD_12	Dec. Dual Status Code	Char	2		Missing Value
				00	Not Medicare enrolled for the month
				01	Qualified Medicare Beneficiary (QMB)-only
				02	QMB and full Medicaid coverage, including presc. drugs
				03	Specified Low-Income Medicare Beneficiary (SLMB)-only
				04	SLMB and full Medicaid coverage, including presc. drugs
				05	Qualified Disabled Working Individual (QDWI)
				06	Qualifying individuals (QI)
				08	Other dual eligible with full Medicaid coverage, including presc. drugs
				09	Other dual eligible, but without Medicaid coverage
				99	Unknown

Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				NA	Non-Medicaid
				XX	Enrolled in Medicare A and/or B, but no D enrollment data for the bene