

2014 NHCS Linked to 2014/2015 CMS Medicare MBSF Data
MBSF: Part D Segment
Date Created: 18JAN2019
Number of Variables: 78

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
PATIENT_ID	ID indicating a patient	Char	ID	
SURVEY	Survey Name	Char		
BENE_ENROLLMT_REF_YR	Reference Year	Num	2014-2015	
PTD_PLAN_CVRG_MONS	Months of Part D Coverage	Num	0-12	Number of Months Covered
RDS_CVRG_MONS	Months of Retiree Drug Subsidy Coverage	Num	0-12	Number of Months Covered
DUAL_ELGBL_MONS	Months of Dual Eligibility	Num	0-12	Number of Months Covered
PTD_CNTRCT_ID_01	Part D Contract Number: January	Char		For value description please see website: https://www.resdac.org/cms-data/variables/part-d-contract-number-january (accessed on 01/15/2019)
PTD_CNTRCT_ID_02	Part D Contract Number: February	Char		For value description please see website: https://www.resdac.org/cms-data/variables/part-d-contract-number-january (accessed on 01/15/2019)
PTD_CNTRCT_ID_03	Part D Contract Number: March	Char		For value description please see website: https://www.resdac.org/cms-data/variables/part-d-contract-number-january (accessed on 01/15/2019)
PTD_CNTRCT_ID_04	Part D Contract Number: April	Char		For value description please see website: https://www.resdac.org/cms-data/variables/part-d-contract-number-january (accessed on 01/15/2019)
PTD_CNTRCT_ID_05	Part D Contract Number: May	Char		For value description please see website: https://www.resdac.org/cms-data/variables/part-d-contract-number-january (accessed on 01/15/2019)
PTD_CNTRCT_ID_06	Part D Contract Number: June	Char		For value description please see website: https://www.resdac.org/cms-data/variables/part-d-contract-number-january (accessed on 01/15/2019)
PTD_CNTRCT_ID_07	Part D Contract Number: July	Char		For value description please see website: https://www.resdac.org/cms-data/variables/part-d-contract-number-january (accessed on 01/15/2019)

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PTD_CNTRCT_ID_08	Part D Contract Number: August	Char		For value description please see website: https://www.resdac.org/cms-data/variables/part-d-contract-number-january (accessed on 01/15/2019)
PTD_CNTRCT_ID_09	Part D Contract Number: September	Char		For value description please see website: https://www.resdac.org/cms-data/variables/part-d-contract-number-january (accessed on 01/15/2019)
PTD_CNTRCT_ID_10	Part D Contract Number: October	Char		For value description please see website: https://www.resdac.org/cms-data/variables/part-d-contract-number-january (accessed on 01/15/2019)
PTD_CNTRCT_ID_11	Part D Contract Number: November	Char		For value description please see website: https://www.resdac.org/cms-data/variables/part-d-contract-number-january (accessed on 01/15/2019)
PTD_CNTRCT_ID_12	Part D Contract Number: December	Char		For value description please see website: https://www.resdac.org/cms-data/variables/part-d-contract-number-january (accessed on 01/15/2019)
PTD_PBP_ID_01	Part D PBP Number: January	Char		Plan benefits package (PBP)
PTD_PBP_ID_02	Part D PBP Number: February	Char		Plan benefits package (PBP)
PTD_PBP_ID_03	Part D PBP Number: March	Char		Plan benefits package (PBP)
PTD_PBP_ID_04	Part D PBP Number: April	Char		Plan benefits package (PBP)
PTD_PBP_ID_05	Part D PBP Number: May	Char		Plan benefits package (PBP)
PTD_PBP_ID_06	Part D PBP Number: June	Char		Plan benefits package (PBP)
PTD_PBP_ID_07	Part D PBP Number: July	Char		Plan benefits package (PBP)
PTD_PBP_ID_08	Part D PBP Number: August	Char		Plan benefits package (PBP)

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Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
PTD_PBP_ID_09	Part D PBP Number: September	Char		Plan benefits package (PBP)
PTD_PBP_ID_10	Part D PBP Number: October	Char		Plan benefits package (PBP)
PTD_PBP_ID_11	Part D PBP Number: November	Char		Plan benefits package (PBP)
PTD_PBP_ID_12	Part D PBP Number: December	Char		Plan benefits package (PBP)
PTD_SGMT_ID_01	Part D Segment Number: January	Char		
PTD_SGMT_ID_02	Part D Segment Number: February	Char		
PTD_SGMT_ID_03	Part D Segment Number: March	Char		
PTD_SGMT_ID_04	Part D Segment Number: April	Char		
PTD_SGMT_ID_05	Part D Segment Number: May	Char		
PTD_SGMT_ID_06	Part D Segment Number: June	Char		
PTD_SGMT_ID_07	Part D Segment Number: July	Char		
PTD_SGMT_ID_08	Part D Segment Number: August	Char		
PTD_SGMT_ID_09	Part D Segment Number: September	Char		
PTD_SGMT_ID_10	Part D Segment Number: October	Char		
PTD_SGMT_ID_11	Part D Segment Number: November	Char		

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
PTD_SGMT_ID_12	Part D Segment Number: December	Char		
CST_SHR_GRP_CD_01	Part D Low-income Cost Share Group Code: January	Char		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; enroll LIS with 100% prem subsidy and high copay
			05	in Parts A and/or B, and D; enroll LIS with 100% prem subsidy and 15% copay
			06	in Parts A and/or B, and D; enroll LIS with 75% prem subsidy and 15% copay
			07	in Parts A and/or B, and D; enroll LIS with 50% prem subsidy and 15% copay
			08	in Parts A and/or B, and D; enroll 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
			13	in Parts A and/or B, not D; none of the above conditions have been met
CST_SHR_GRP_CD_02	Part D Low-income Cost Share Group Code: February	Char		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; enroll LIS with 100% prem subsidy and high copay
			05	in Parts A and/or B, and D; enroll LIS with 100% prem subsidy and 15% copay
			06	in Parts A and/or B, and D; enroll LIS with 75% prem subsidy and 15% copay

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
			07	in Parts A and/or B, and D; enroll LIS with 50% prem subsidy and 15% copay
			08	in Parts A and/or B, and D; enroll 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
			13	in Parts A and/or B, not D; none of the above conditions have been met
CST_SHR_GRP_CD_03	Part D Low-income Cost Share Group Code: March	Char		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; enroll LIS with 100% prem subsidy and high copay
			05	in Parts A and/or B, and D; enroll LIS with 100% prem subsidy and 15% copay
			06	in Parts A and/or B, and D; enroll LIS with 75% prem subsidy and 15% copay
			07	in Parts A and/or B, and D; enroll LIS with 50% prem subsidy and 15% copay
			08	in Parts A and/or B, and D; enroll 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
			13	in Parts A and/or B, not D; none of the above conditions have been met
CST_SHR_GRP_CD_04	Part D Low-income Cost Share Group Code: April	Char		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

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
			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; enroll LIS with 100% prem subsidy and high copay
			05	in Parts A and/or B, and D; enroll LIS with 100% prem subsidy and 15% copay
			06	in Parts A and/or B, and D; enroll LIS with 75% prem subsidy and 15% copay
			07	in Parts A and/or B, and D; enroll LIS with 50% prem subsidy and 15% copay
			08	in Parts A and/or B, and D; enroll 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
			13	in Parts A and/or B, not D; none of the above conditions have been met
CST_SHR_GRP_CD_05	Part D Low-income Cost Share Group Code: May	Char		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; enroll LIS with 100% prem subsidy and high copay
			05	in Parts A and/or B, and D; enroll LIS with 100% prem subsidy and 15% copay
			06	in Parts A and/or B, and D; enroll LIS with 75% prem subsidy and 15% copay
			07	in Parts A and/or B, and D; enroll LIS with 50% prem subsidy and 15% copay
			08	in Parts A and/or B, and D; enroll 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
			13	in Parts A and/or B, not D; none of the above conditions have been met

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
CST_SHR_GRP_CD_06	Part D Low-income Cost Share Group Code: June	Char		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; enroll LIS with 100% prem subsidy and high copay
			05	in Parts A and/or B, and D; enroll LIS with 100% prem subsidy and 15% copay
			06	in Parts A and/or B, and D; enroll LIS with 75% prem subsidy and 15% copay
			07	in Parts A and/or B, and D; enroll LIS with 50% prem subsidy and 15% copay
			08	in Parts A and/or B, and D; enroll 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
			13	in Parts A and/or B, not D; none of the above conditions have been met
CST_SHR_GRP_CD_07	Part D Low-income Cost Share Group Code: July	Char		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; enroll LIS with 100% prem subsidy and high copay
			05	in Parts A and/or B, and D; enroll LIS with 100% prem subsidy and 15% copay
			06	in Parts A and/or B, and D; enroll LIS with 75% prem subsidy and 15% copay
			07	in Parts A and/or B, and D; enroll LIS with 50% prem subsidy and 15% copay
			08	in Parts A and/or B, and D; enroll LIS with 25% prem subsidy and 15% copay

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
			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
			13	in Parts A and/or B, not D; none of the above conditions have been met
CST_SHR_GRP_CD_08	Part D Low-income Cost Share Group Code: August	Char		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; enroll LIS with 100% prem subsidy and high copay
			05	in Parts A and/or B, and D; enroll LIS with 100% prem subsidy and 15% copay
			06	in Parts A and/or B, and D; enroll LIS with 75% prem subsidy and 15% copay
			07	in Parts A and/or B, and D; enroll LIS with 50% prem subsidy and 15% copay
			08	in Parts A and/or B, and D; enroll 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
			13	in Parts A and/or B, not D; none of the above conditions have been met
CST_SHR_GRP_CD_09	Part D Low-income Cost Share Group Code: September	Char		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; enroll LIS with 100% prem subsidy and high copay

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
			05	in Parts A and/or B, and D; enroll LIS with 100% prem subsidy and 15% copay
			06	in Parts A and/or B, and D; enroll LIS with 75% prem subsidy and 15% copay
			07	in Parts A and/or B, and D; enroll LIS with 50% prem subsidy and 15% copay
			08	in Parts A and/or B, and D; enroll 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
			13	in Parts A and/or B, not D; none of the above conditions have been met
CST_SHR_GRP_CD_10	Part D Low-income Cost Share Group Code: October	Char		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; enroll LIS with 100% prem subsidy and high copay
			05	in Parts A and/or B, and D; enroll LIS with 100% prem subsidy and 15% copay
			06	in Parts A and/or B, and D; enroll LIS with 75% prem subsidy and 15% copay
			07	in Parts A and/or B, and D; enroll LIS with 50% prem subsidy and 15% copay
			08	in Parts A and/or B, and D; enroll 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
			13	in Parts A and/or B, not D; none of the above conditions have been met
CST_SHR_GRP_CD_11	Part D Low-income Cost Share Group Code: November	Char		Missing Value
			00	Not Medicare enrolled for the month

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
			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; enroll LIS with 100% prem subsidy and high copay
			05	in Parts A and/or B, and D; enroll LIS with 100% prem subsidy and 15% copay
			06	in Parts A and/or B, and D; enroll LIS with 75% prem subsidy and 15% copay
			07	in Parts A and/or B, and D; enroll LIS with 50% prem subsidy and 15% copay
			08	in Parts A and/or B, and D; enroll 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
			13	in Parts A and/or B, not D; none of the above conditions have been met
CST_SHR_GRP_CD_12	Part D Low-income Cost Share Group Code: December	Char		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; enroll LIS with 100% prem subsidy and high copay
			05	in Parts A and/or B, and D; enroll LIS with 100% prem subsidy and 15% copay
			06	in Parts A and/or B, and D; enroll LIS with 75% prem subsidy and 15% copay
			07	in Parts A and/or B, and D; enroll LIS with 50% prem subsidy and 15% copay
			08	in Parts A and/or B, and D; enroll 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

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Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
			13	in Parts A and/or B, not D; none of the above conditions have been met
RDS_IND_01	Part D Retiree Drug Subsidy Indicator: January	Char		Missing Value
			0	Not Medicare enrolled for the month
			N	No Employer subsidy for the retired beneficiary
			Y	Employer subsidized for the retired beneficiary
RDS_IND_02	Part D Retiree Drug Subsidy Indicator: February	Char		Missing Value
			0	Not Medicare enrolled for the month
			N	No Employer subsidy for the retired beneficiary
			Y	Employer subsidized for the retired beneficiary
RDS_IND_03	Part D Retiree Drug Subsidy Indicator: March	Char		Missing Value
			0	Not Medicare enrolled for the month
			N	No Employer subsidy for the retired beneficiary
			Y	Employer subsidized for the retired beneficiary
RDS_IND_04	Part D Retiree Drug Subsidy Indicator: April	Char		Missing Value
			0	Not Medicare enrolled for the month
			N	No Employer subsidy for the retired beneficiary
			Y	Employer subsidized for the retired beneficiary
RDS_IND_05	Part D Retiree Drug Subsidy Indicator: May	Char		Missing Value
			0	Not Medicare enrolled for the month

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
			N	No Employer subsidy for the retired beneficiary
			Y	Employer subsidized for the retired beneficiary
RDS_IND_06	Part D Retiree Drug Subsidy Indicator: June	Char		Missing Value
			0	Not Medicare enrolled for the month
			N	No Employer subsidy for the retired beneficiary
			Y	Employer subsidized for the retired beneficiary
RDS_IND_07	Part D Retiree Drug Subsidy Indicator: July	Char		Missing Value
			0	Not Medicare enrolled for the month
			N	No Employer subsidy for the retired beneficiary
			Y	Employer subsidized for the retired beneficiary
RDS_IND_08	Part D Retiree Drug Subsidy Indicator: August	Char		Missing Value
			0	Not Medicare enrolled for the month
			N	No Employer subsidy for the retired beneficiary
			Y	Employer subsidized for the retired beneficiary
RDS_IND_09	Part D Retiree Drug Subsidy Indicator: September	Char		Missing Value
			0	Not Medicare enrolled for the month
			N	No Employer subsidy for the retired beneficiary
			Y	Employer subsidized for the retired beneficiary
RDS_IND_10	Part D Retiree Drug Subsidy Indicator: October	Char		Missing Value

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
			0	Not Medicare enrolled for the month
			N	No Employer subsidy for the retired beneficiary
			Y	Employer subsidized for the retired beneficiary
RDS_IND_11	Part D Retiree Drug Subsidy Indicator: November	Char		Missing Value
			0	Not Medicare enrolled for the month
			N	No Employer subsidy for the retired beneficiary
			Y	Employer subsidized for the retired beneficiary
RDS_IND_12	Part D Retiree Drug Subsidy Indicator: December	Char		Missing Value
			0	Not Medicare enrolled for the month
			N	No Employer subsidy for the retired beneficiary
			Y	Employer subsidized for the retired beneficiary
DUAL_STUS_CD_01	Medicare-Medicaid Dual Eligibility Code: January	Char	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 (VAR) Label	VAR Type	Range of Values	Value Description
			NA	Non-Medicaid
DUAL_STUS_CD_02	Medicare-Medicaid Dual Eligibility Code: February	Char	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_03	Medicare-Medicaid Dual Eligibility Code: March	Char	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 (VAR) Label	VAR Type	Range of Values	Value Description
			NA	Non-Medicaid
DUAL_STUS_CD_04	Medicare-Medicaid Dual Eligibility Code: April	Char	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_05	Medicare-Medicaid Dual Eligibility Code: May	Char	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 (VAR) Label	VAR Type	Range of Values	Value Description
			NA	Non-Medicaid
DUAL_STUS_CD_06	Medicare-Medicaid Dual Eligibility Code: June	Char	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_07	Medicare-Medicaid Dual Eligibility Code: July	Char	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 (VAR) Label	VAR Type	Range of Values	Value Description
			NA	Non-Medicaid
DUAL_STUS_CD_08	Medicare-Medicaid Dual Eligibility Code: August	Char	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_09	Medicare-Medicaid Dual Eligibility Code: September	Char	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 (VAR) Label	VAR Type	Range of Values	Value Description
			NA	Non-Medicaid
DUAL_STUS_CD_10	Medicare-Medicaid Dual Eligibility Code: October	Char	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_11	Medicare-Medicaid Dual Eligibility Code: November	Char	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

MBSF: Part D Segment

Date Created: 18JAN2019

Number of Variables: 78

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
			NA	Non-Medicaid
DUAL_STUS_CD_12	Medicare-Medicaid Dual Eligibility Code: December	Char	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