

Request for Records Disposition Authority

Records Schedule Number DAA-0440-2015-0009

Schedule Status Modified Approved Version

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Number of Total Disposition Items	Number of Permanent Disposition Items	Number of Temporary Disposition Items	Number of Withdrawn Disposition Items
3	2	1	0

GAO Approval

Outline of Records Schedule Items for DAA-0440-2015-0009

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	<p>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.</p>
1.1	<p>Public Use Files and Reports</p> <p>Disposition Authority Number DAA-0440-2015-0009-0001</p> <p>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</p> <p>Final Disposition Permanent</p> <p>Item Status Active</p> <p>Is this item media neutral? No</p> <p>Explanation of limitation Records are exclusively electronic.</p> <p>Do any of the records covered by this item currently exist in electronic format(s) other than e-mail and word processing? Yes</p> <p>Do any of the records covered by this item exist as structured electronic data? Yes</p> <p>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</p>

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?	Every 1 Years

1.2

Analytic and Research Files (restricted)

Disposition Authority Number	DAA-0440-2015-0009-0002
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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?	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 e-mail 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
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Additional Information

2

What will be the date span of the initial transfer of records to the National Archives? From 1990 To 1997

How frequently will your agency transfer these records to the National Archives? 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 e-mail and word processing? No

GRS or Superseded Authority Citation
N1-440-04-01 / 1
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	By	Title	Organization
04/13/2015	Certify	Tony Tucker	Records Officer	Office of Strategic Operations and Regulatory Affairs - OSORA
03/22/2017	Return for Revision	Sean Curry	Senior Appraisal Archivist	National Archives and Records Administration - Agency Services
03/27/2017	Return for Revision	Sean Curry	Senior Appraisal Archivist	National Archives and Records Administration - Agency Services
03/28/2017	Submit For Certification	Carlos Simon	Records Officer	OSORA - IRISG
03/28/2017	Return to Submitter	Carlos Simon	Records Officer	OSORA - IRISG
03/29/2017	Submit For Certification	Carlos Simon	Records Officer	OSORA - IRISG
03/29/2017	Certify	Carlos Simon	Records Officer	OSORA - IRISG
07/06/2017	Submit for Concurrence	Sean Curry	Senior Appraisal Archivist	National Archives and Records Administration - Agency Services
07/11/2017	Concur	Margaret Hawkins	Director of Records Management Services	National Records Management Program - ACNR Records Management Services
07/11/2017	Concur	Margaret Hawkins	Director of Records Management Services	National Records Management Program - ACNR Records Management Services
07/13/2017	Approve	David Ferriero	Archivist of the United States	Office of the Archivist - Office of the Archivist

Executive Summary

Summary

The Centers for Medicare & Medicaid Services, Department of Health and Human Services, requests disposition authority for records related to research and program analysis. Proposed for permanent retention are public use files, and other summarized data sets related to all agency programs. Proposed for temporary retention are data sets used to create permanent records, and records related to demonstrations and program pilots. These records have temporary value because they were previously approved as temporary, and are captured elsewhere in other permanent records.

Permanent Item Numbers 0001, 0002

Federal Register Notice Required

Publication Date 2017-03-17

Copies Requested 2

Comments Received 0

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.

AUTHORITY NUMBER: DAA-0440-2015-0009, ITEM 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, 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. Those retention periods should be followed for Master Files and other records related to those within this bucket.	National Health Accounts Estimates (previously MTX/MATRIX)	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.
		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 and analysis is conducted on an on-going basis and provide current annual estimates as well as revisions to prior years.	DAA-0440-2013-0006, item 0001	Permanent	Office of the Actuary.	No change.
	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.	N1-440-09-04, item 3a	Permanent	Office of Enterprise Data and Analytics	Reduction from 20 years transfer.

<p>Medicare Program Utilization. Analytic records related to Medicare Parts A, B, and C, that provide data on program utilization and implementation.</p>	<p>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.</p>	<p>N1-440-93-03, item 1</p>	<p>Permanent</p>	<p>Office of the Actuary.</p>	<p>No change.</p>
	<p>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.</p>	<p>N1-440-93-03, item 2</p>	<p>Permanent</p>		<p>No change.</p>
	<p>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.</p>	<p>N1-440-93-03, item 3</p>	<p>Permanent</p>		<p>No change.</p>
<p>Chronic Conditions. Public use related to chronic conditions.</p>	<p>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."</p>	<p>DAA-0440-2012-0013, item 0002</p>	<p>Permanent</p>	<p>Office of Enterprise Data and Analytics</p>	<p>No change.</p>

<p>Health and Social Survey Records. Health and social survey records, including information on the cost of providing medical care, income, financial arrangements, alternative forms of practice, service delivery, changes in physician-hospital arrangements, participation in public programs, and patient characteristics. Records may also include physician socio-demographic data, county-level health care resources data, and hospital-level data. CMS conducts such surveys periodically. Includes Geographic Practice Cost Index, which are follow-up surveys to the PPCIS</p>	<p>Physician Practice Cost & Income Survey (PPCIS). The PPCIS system contains data collected to develop a Geographic Cost Practice Index, refine the cost share weights of the Medicare Economic Index, and evaluate Federal Reimbursement of physicians participating in Medicare and Medicaid. Includes a sample of approximately 5,000 physicians who provide patient care at least 20 hours per week in an office or hospital setting, and who live in the 50 States and the District of Columbia. The data include information on practice costs such as rent for space and equipment, employee salaries and compensation, malpractice insurance, physician gross and net income, and related fees and costs.</p>	<p>N1-440-94-02, item 1</p>	<p>Permanent</p>	<p>Center for Medicare</p>	<p>No change.</p>
<p>Health Care Common Procedure Codes</p>	<p>Public Use Version of Annual Code Summary (electronic copy). Records of the Centers for Medicare & Medicaid Services (CMS) created 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 discontinued codes.</p>	<p>N1-440-01-02, item 3c1b</p>	<p>Permanent</p>	<p>Center for Medicare</p>	<p>Increase from annual transfer.</p>

		System Documentation	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			
	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			

AUTHORITY NUMBER: DAA-0440-2015-0009, ITEM 0002

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	Medicare Program Utilization. Summarized data files and analytic records related to Medicare Parts A, B, and C, that provide summary data on program utilization and implementation.	Standard Analytical Files (SAFs). Standard Analytical Files (5% sampling), output files (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 Care, 5) 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.

<p>these records are scheduled separately within other buckets. Those retention periods should be followed for Master Files and other records related to those within this bucket.</p>	<p>Medicaid Utilization. Research files related to Medicaid utilization, including summarized state-submitted data.</p>	<p>Medicaid Analytic extract (MAX): research file extracted from the Medicaid 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).</p>	<p>NEW</p>	<p>Permanent</p>	<p>Office of Enterprise Data and Analytics</p>	<p>n/a</p>
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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
<p>7B1: Analytic Records: Records that are comprised of data consolidated from other CMS systems and records to facilitate program analysis and research. NOTE: this item does NOT include formal reports, operational studies or public use files created as part of analytical processes. See bucket 1 for disposition of formal reports and studies. See bucket 7A for public use and research files related to any CMS data set.</p>	<p>Medicare Utilization Data Collection and Access System (MUDCAS): A collection of automated systems that support the collection and analysis of Medicare and Medicaid program enrollment and utilization data on Medicare beneficiaries enrolled in hospital insurance (Part A) or medical insurance (Part B) of the Medicare program for statistical and</p>	<p>Master Files, National Claims History (NCH): The current System of Record for all Medicare Part A and Part B utilization data. Function as CMS's repository of paid Medicare claims data beginning with the service year 1991. The data from the NCH IS used for statistical and research purposes related to evaluating/studying the operation and effectiveness of the Medicare program.</p>	<p>N1-440-09-10, item 2a</p>	<p>Temporary, 75 years</p>		<p>Decrease (setting a minimum of 10 year retention; program office may retain longer).</p>

related to any CIVIS data-set.

program for statistical and research purposes related to evaluating and studying the operation and effectiveness of the Medicare program.

Master Files, National Medicare Utilization Database (NMUD): A derivative of NCH, the data warehouse was implemented to take advantage of storing Medicare claims data beginning in 1998. It houses granular-level, beneficiary-specific detail data in relational database tables. NMUD contains billing and use data on Medicare beneficiaries enrolled in hospital insurance (Part A) and/or medical insurance (Part B) under the fee-for-service program, which is used for statistical and research purposes related to evaluating/studying the operation and effectiveness of the Medicare program.	N1-440-09-10, item 2b	Temporary, 30 years		Decrease (setting a minimum of 10 year retention; program office may retain longer).
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<p>Master Files, Medicare Provider Analysis and Review Systems (MEDPAR): CMS's repository of beneficiary data beginning with service year 1992. MEDPAR maintains information on inpatient and hospital and Skilled Nursing Facility (SNF) stays of Medicare beneficiaries (Part A). The primary purpose of the MEDPAR is to enable CMS and its contractors to facilitate research on the quality and effectiveness of care provided, update annual hospital Prospective Payment System (PPS) rates, and to recalculate Supplemental Security Income (SSI) ratios for hospitals that are paid under the Increased reimbursement under Part A of the Medicare 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.</p>	<p>N1-440-09-10, Item 2b</p>	<p>Temporary, 30 years</p>		<p>No change in final disposition; CMS may reduce retention to 10 years, but has flexibility to keep individual series longer as required by business needs.</p>
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<p>Master Files, Incurred But Not Reported (IBNR) System: contains summarized and individually identifiable claim level Medicare claims information. The data is based on the date the cost for Medicare services was incurred and the date the payment for those services was authorized. The data is used as the basis for estimating other Governmental Liabilities reported on the Balance Sheet and to provide a sample of the granular data to OFM auditors. It supports the Office of Financial Management's Annual report that supports establishment of Medicare claims liability by reviewing all claims paid for services rendered over the previous three years up to services rendered and received no later than September 30 of the current year.</p>	N1-440-09-10, item 2b	Temporary, 30 years		No change in final disposition; CMS may reduce retention to 10 years, but has flexibility to keep individual series longer as required by business needs.
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<p>Integrated Data Repository (Master File): An enterprise resource that will provide one integrated view of all CMS data to administer the Medicare and Medicaid Programs, specifically the Medicare Part D (prescription drug) Program. The applications consist of Medicare Parts A, B, C and D entitlement, enrollment and utilization data to validate Part D eligibility and other data, enrollment of individuals in the drug benefit or subsidy assistance programs, pay prescription drug plans, evaluate the quality of the new prescription drug benefit, support drug research, provide better access to data and provide opportunities for other government and research organizations to improve health care for the public.</p>	<p>Master Files</p>	<p>N1-440-09-15, item 2</p>	<p>Temporary, 75 years</p>		<p>No change in final disposition; CMS may reduce retention to 10 years, but has flexibility to keep individual series longer as required by business needs.</p>
<p>Health Care Quality Improvement System/Records. A collection of automated systems that facilitate the collaboration of CMS and the Quality Improvement Organizations (QIO) to monitor and improve utilization and quality of care</p>	<p>Master Files, Consolidated Renal Operations in a Web-Enabled Environment (CROWN): Facilitates the collection and maintenance of information about the Medicare End Stage Renal Disease (ESRD) program, its beneficiaries and the services provided to beneficiaries.</p>	<p>N1-440-09-03, item 1b</p>	<p>Temporary, 10 years</p>		<p>No change.</p>

utilization and quality of care for Medicare and Medicaid beneficiaries. 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 Indicator Report; 8) Clinical information on patients in nursing homes; and 9) Financial incentives for eligible professionals to participate in a voluntary quality-reporting program.

<p>Master Files, Quality Improvement and Evaluation System (QIES): provides states and CMS with the ability to use performance information to enhance onsite inspection activities, monitor quality of care, and facilitate providers' efforts related to continuous quality improvement. Includes summarized data for payment error rates, and related to provider performance.</p>	<p>N1-440-09-03, item 1b</p>	<p>Temporary, 10 years</p>		<p>No change.</p>
<p>Master Files, Physician Quality Reporting Initiative (PQRI): Collects and maintains individually identifiable information for all eligible professionals who voluntarily participate in the PQRI. Eligible professionals report on a designated set of quality measures for services paid under the traditional fee-for-service program. The information includes but not limited to name, address, phone number, social security number, taxpayer ID number, unique physician ID number, (UPIN) and National Provider Identifier (NPI). Patient health information for provider patients will include, but is not limited to Health Insurance Claims Number and social security number.</p>	<p>N1-440-09-03, item 1b</p>	<p>Temporary, 10 years</p>		<p>No change.</p>
<p>Master Files, Standard Data Processing System (SDPS): Consists of many data and reporting requirements that have been designed and developed in response to the ongoing ADP requirements of the various QIOs and other affiliated partners to fulfill its contractual requirements with CMS. Provides individual medical records, aggregate medical data, clinical data and financial data related to medical claims.</p>	<p>N1-440-09-03, item 1b</p>	<p>Temporary, 10 years</p>		<p>No change.</p>

	Master Files, Quality Improvement Initiative (QII): Assists Medicare beneficiaries and their caregivers by promoting the availability of quality measures, helping to ensure they understand what the measures mean, and encouraging them to use the measures as part of their health care decision-making process, QII will assist Medicare beneficiaries and their caregivers by promoting the availability of the quality measures, helping to ensure they understand what the measures mean, and encouraging them to use the measures as part of their health care decision-making process.	N1-440-09-03, Item 1b	Temporary, 10 years		No change.
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	<p>Medicaid Statistical Information System (MSIS): Evaluates state submitted tape files of Medical eligibility and claims data (inpatient, long term care, prescription drug and other claims) and 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 record so users need no link back to eligibility files for all uses, integrity data are augmented with a summary of Medicaid payments and utilization for selected types of services for each eligible individual which results as a MSIS Annual Personal Summary File for each state and year.</p>	<p>Master Files</p>	<p>NEW</p>	<p>n/a</p>		<p>n/a</p>
<p>7B2: Demonstration, pilots, and models: records related to demonstrations and pilots carried out by CMS and Its contractors on a variety of topics. Used primarily to test new methods and processes. Final reports of any such project are captured as</p>	<p>Demonstrations, Pilots and Models Records</p>	<p>Pilot projects - Administrative: systems developed to streamline or to study the streamlining of administrative functions of CMS Records/data may include but are not limited to forms, data input, applications, charts, reports, correspondence, etc.</p>	<p>N1-440-11-02, item 1</p>	<p>Temporary, 5 years</p>		<p>Increase.</p>

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

<p>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.</p>	<p>N1-440-11-02, item 2</p>	<p>Temporary, 10 years</p>		<p>No change.</p>
<p>Formal demonstration/pilot, when demonstration never occurred.</p>	<p>N1-440-11-04, item 1b</p>	<p>Temporary, 5 years</p>		<p>Increase.</p>
<p>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.</p>	<p>N1-440-11-04, item 1a</p>	<p>Temporary, 10 years</p>		<p>No change.</p>

<p>Personal Health Care (PHR) Pilot. offered to fee-for-service (FFS) beneficiaries in selected states which provides FFS beneficiaries with free access to a COTS electronic PHR. The purpose of the system is to study the uptake and utilization of a PHR to help Medicare develop the requirements for a Medicare-compliant PHR. Pilots Include, but not limited to: MyPHRSC (My Personal Health Record - South Carolina); and PHR Choice. pilot for those living in Arizona and Utah.</p>	<p>N1-440-10-03, item 2</p>	<p>Temporary, 10 years</p>		<p>No change.</p>
<p>Electronic Health Records Demonstration System</p>	<p>NEW</p>	<p>n/a</p>		<p>n/a</p>
<p>Million Heart Data Registry Model). All records related to the Million Heart Model, including 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.</p>	<p>NEW</p>	<p>n/a</p>		<p>n/a</p>
<p>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 coordination. The OCMR is designed as a web based single page application.</p>	<p>NEW</p>	<p>n/a</p>		<p>n/a</p>

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