
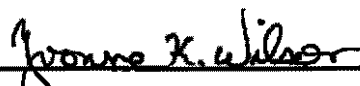


REQUEST FOR RECORDS DISPOSITION AUTHORITY		JOB NUMBER N1-440-09-15	
TO: NATIONAL ARCHIVES & RECORDS ADMINISTRATION 8601 ADELPHI ROAD COLLEGE PARK, MD 20740-6001		Date received 9-24-2009	
1. FROM (Agency or establishment) Department of Health and Human Services		<p align="center">NOTIFICATION TO AGENCY</p> <p>In accordance with the provisions of 44 U.S.C. 3303a, the disposition request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10.</p>	
2. MAJOR SUBDIVISION Centers for Medicare and Medicaid Services (CMS)			
3. MINOR SUBDIVISION			
4. NAME OF PERSON WITH WHOM TO CONFER Vickie Robey, CMS Records Officer	5. TELEPHONE NUMBER 410-786-7883	DATE 3 July 12	ARCHIVIST OF THE UNITED STATES 
<p>6. AGENCY CERTIFICATION</p> <p>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 on the attached <u>2</u> page(s) are not needed now for the business for this agency or will not be needed after the retention periods specified; and that written concurrence from the General Accounting Office, under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies,</p> <p align="center"> <input checked="" type="checkbox"/> is not required <input type="checkbox"/> is attached; or <input type="checkbox"/> has been requested. </p>			
DATE 09/23/2009	SIGNATURE OF AGENCY REPRESENTATIVE S:// Yvonne K. Wilson 		TITLE HHS Records Officer
7. ITEM NO.	8. DESCRIPTION OF ITEM AND PROPOSED DISPOSITION	9. GRS OR SUPERSEDED JOB CITATION	10. ACTION TAKEN (NARA USE ONLY)
	<p><u>CMS Integrated Data Repository (IDR)</u></p> <p>See attached.</p>		

INACTIVE - ALL ITEMS SUPERSEDED

Attachment to SF-115, for CMS Electronic Systems Schedule

Integrated Data Repository (IDR) – (System of Record)

The primary purpose of this system is to establish 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. Information retrieved from this system of records will also be disclosed to:

- 1) Support regulatory, reimbursement and policy functions performed within the agency or by a contractor, consultant or CMS grantee;
- 2) Assist another Federal or state agency;
- 3) Support providers and suppliers of services for administration of Title XVIII;
- 4) Assist third parties where the contact is expected to have information relating to the individual's capacity to manage his or her own affairs;
- 5) Assist Medicare Advantage Plans and Part D Prescription Drug Plans;
- 6) Support Quality Improvement Organizations;
- 7) Assist other insurers for processing individual insurance claims;
- 8) Facilitate research on the quality and effectiveness of care provided as well as payment related projects;
- 9) Support litigation involving the agency; and
- 10) Combat fraud, waste and abuse in certain health benefits program.

The data collected and maintained in the IDR are retrieved from the following SOR databases:

- 1) Medicare Drug Data Processing System (NARA job N1-440-09-04; pending approval as temporary),
- 2) Medicare Beneficiary Database (NARA job N1-440-09-06; approved as temporary),
- 3) Medicare Advantage Prescription Drug System (NARA job N1-440-09-04, pending approval as temporary),
- 4) Retiree Drug Subsidy Program (NARA job N1-440-09-12, approved as temporary),
- 5) Common Working File (NARA job N1-440-10-07, approved as temporary),
- 6) National Claims History (NARA job N1-440-09-10; approved as permanent),
- 7) Enrollment Database (NARA job N1-440-09-06, approved as temporary),
- 8) Multi-Carrier Claims System (NARA job N1-440-04-03, approved as temporary),
- 9) Fiscal Intermediary Shared System (NARA job N1-440-04-03, approved as temporary),
- 10) Unique Physician Provider Identification Number (NARA job N1-440-09-18, approved as temporary),
- 11) Medicare Supplier Identification File (NARA job N1-440-09-18, approved as temporary).

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. The IDR database will over time also contain demographic information on Medicaid beneficiaries, Medicare providers and physicians and, employer plans that are receiving a subsidy from CSM for providing creditable health coverage to their retirees.

INACTIVE - ALL ITEMS SUPERSEDED

The IDR is specifically designed to eventually be extended to include other kinds of data such as HIGLAS, Medicaid, financial operational data, claims attachment data, 1-800 Medicare call center data, medicare.gov data and quality data. It is through the integration of this data with other data (e.g., historic data, Part and B data) that the IDR will have value for quality improvement, research on outcomes and effectiveness of drugs, post-market surveillance and other analytic efforts.

Data resides on mainframe system and is maintained in compliance with Public Law 74-271, Social Security Act, as amended, Privacy Act, Computer Fraud and Abuse Act of 1986, Computer Security Act of 1987, Paperwork Reduction Act of 1978, as amended in 1995, U.S. Code, 44 Chapter 35, Clinger-Cohen Act of 1966, Health Insurance and Portability and Accountability Act, Freedom of Information Act, E-Government Act of 2002, FISMA; Presidential Decision Directive/NSC-63; OMB Circulars A-123 and A-127

~~1. Inputs — Data pulled from other CMS systems. Includes but not limited to data: Standard data for identification such as health insurance claim number, Social security number, gender, race/ethnicity, date of birth, geographic location, Medicare enrollment and entitlement information, MSP data necessary for appropriate Medicare claim payment, hospice election, MA plan elections and enrollment, ESRD entitlement, historic and current listing of residences and Medicare eligibility and Managed Care institutional status. Additionally, this system will maintain identifying information on physicians, providers, employer plans, Medicaid recipients and Medicare secondary payers.~~

~~DISPOSITION: Temporary. Cutoff annually. Delete/destroy 1 year after cutoff, or when no longer needed for Agency business, whichever is later. (GRS 20, item 2a4)~~

~~2. Master Files — Includes but not limited to: Standard data for identification such as health insurance claim number, Social security number, gender, race/ethnicity, date of birth, geographic location, Medicare enrollment and entitlement information, MSP data necessary for appropriate Medicare claim payment, hospice election, MA plan elections and enrollment, ESRD entitlement, historic and current listing of residences and Medicare eligibility and managed Care institutional status; identifying information on physicians, providers, employer plans, Medicaid recipients and Medicare secondary payers.~~

~~DISPOSITION: TEMPORARY. Cut off at the end of the FY. Delete/Destroy 75 years after cutoff.~~

~~3. Outputs — Digital reports produced for individual users or bulk reports.~~

~~DISPOSITION: Temporary. Cutoff annually. Delete/destroy 1 year after cutoff, or when no longer needed for Agency business, whichever is later. (GRS 20, Item 12)~~

~~4. System Documentation: User manuals, data dictionaries, system plans, and other documentation required to operate the utilization database.~~

~~DISPOSITION: PERMANENT. Transfer along with master files. (GRS 20, item 11a1)~~

Superseded by Job / Item number:

DAA-0440-2015-0009-0003

Date (MM/DD/YYYY):

7/13/2017