Competitive Plans Demonstration Pharmacy File

December 1, 2025

Version 1.00.00
Future Specification

Revision History

Version	Date	Para/Tbl/Fig	Originator	Description of Change
1.00.00	12/1/2025	• Whole document	Wendy Funk	• Initial versioning.

MDR Competitive Plans Demonstration Pharmacy File

I.   SOURCE:

Data Capture: The Enrollment, Eligibility and Encounter (EEE) Contractor for the CPD program (MicroHealth) prepares the monthly CPD Pharmacy file for the MDR, along with the Clinical, Provider and Enrollment files.

II.   TRANSMISSION (FORMAT AND FREQUENCY)

The data files are sent monthly in accordance with ICD XXXXXX. Batches include new and update records.

III.   ORGANIZATION AND BATCHING

The CPD Pharmacy file contains all fiscal years of data.

IV.   RECEIVING FILTERS

N/A

V.   UPDATE PROCEDURES

- The raw CPD pharmacy file contains new records, updated/corrected records and records that need to be deleted from the monthly MDR file. Records are deleted and corrected according to the following logic:
  - Records in each monthly batch with the Transaction Type Code="D" are used to purge records from the MDR file based on DMISID and Unique Patient Reference Number.
  - Records in each monthly batch with the Transaction Type Code="C" replace any previously received record with the same DMISID and Unique Patient Reference Number.
  - After removing/replacing records per steps above, only the most recent version of a record should be retained, based on DMISID, Unique Patient Reference Number and File Date.
  - Entire duplicate records in each feed need to be purged.

VI.   FIELD TRANSFORMATIONS AND DELETIONS FOR MDR CPD PHARMACY FILE

- The table below describes each reference (or data) file being used to append fields to each MDR CPD Pharmacy data.

Merge	Merge to	Date Matching	Additional Matching
Longitudinal VM4/VM6 File	Master	Latest Encounter Date, with begin and end dates for each changeable demographic segment.	PATID if available.
Master Person Index	Master	None	For records with blank PATID, match Designated Provider Records by sponssn, patsex, dob and grouped member relationship code.

VII.   RECORD LAYOUT AND CONTENT

MDR CPD Pharmacy File: Data are stored as a SAS data set. The table below describes the format, file layout, and field derivation rules for the CPD Pharmacy Detail data set.

Data Element	Format	Source File Location	SAS Name	Note
DMIS ID	$4	1-4	dmisid	No transformation
EDIPN	$10	16-25	edipn	No transformation
Sponsor SSN	$9	26-34	sponssn	No transformation
Patient's Last Name	$26	37-62	last_nm	No transformation
Patient's First Name	$20	63-82	first_nm	No transformation
Patient's Middle Name	$20	83-102	middle_nm	No transformation
Patient's Cadency Name	$4	103-106	cadency_nm	No transformation
Patient's Date of Birth	yyyymmdd	107-114	dob	No transformation
Patient Gender	$1	115	sex	No transformation
Quantity Dispensed	6	116-121	qty	No transformation
Date Dispensed	yyyymmdd	122-129	dispdate	No transformation
National Drug Code (NDC) Number	$11	130-140	ndc	No transformation
Cost Data	11	141-151	charge	No transformation
Basis for Cost Determination	$3	152-154	costdet	No transformation

Data Element	Format	Source File Location	SAS Name	Note
Unique Patient Reference ID Number	$12	155-166	record_id	No transformation
Co-payment Amount Collected	6	167-172	copay	No transformation
Pharmacy NAPD Number	$9	173-190	provid	No transformation
Number of Days Provided	3	191-193	daysup	No transformation
Provider Prescribing Medication	$18	194-211	prescriber	No transformation
Dispensed As Written Indicator	$1	212	daw	No transformation
Transaction Type	$1	213	trantype	No transformation
Internally Derived Fields				
Fiscal Year	$2		fy	Derive from dispense date
Fiscal Month	$4		fm	Derive from dispense date
CPD Area	$20		cpd_area	If PCM_ID = 101 then "CS-Tampa" else if PCM_ID = 103 then "CS-Atlanta" else "None"
Longitudinal VM-4 DEERS Merge				
DEERS Enrollment DMISID	$4	N/A	denrsite	Fill with enrollment DMISID from LVM-4, if the Date Dispensed on the claim is between the begin and end date associated with the enrollment site.
DEERS Health Care Delivery Program Code	$3	N/A	dhcdp	Fill with DEERS health care delivery program coverage code from LVM-4, if the Date Dispensed on the claim is between the begin and end date associated with the DEERS health care delivery program coverage code.
DEERS Beneficiary Category	$3	N/A	bencat	Fill with DEERS beneficiary category from LVM-4, if the Date Dispensed on the claim is between the begin and end date associated with the DEERS beneficiary category.
DEERS Sponsor Service Aggregate	$1	N/A	dsponsvc	Fill with DEERS sponsor service (aggregate) from LVM-4, if the Date Dispensed on the claim is between the begin and end date associated with the DEERS sponsor service (aggregate).

Data Element	Format	Source File Location	SAS Name	Note
DEERS Zip Code	$5	N/A	deerszip	Fill with DEERS zip code from LVM-4, if the Date Dispensed on the claim is between the begin and end date associated with the DEERS zip code.
DEERS Race Code	$1	N/A	race	Fill with DEERS Race Code from LVM-4
DEERS Ethnicity Code	$1	N/A	ethnic	Fill with DEERS Ethnicity Code from LVM-4
DEERS Eligibility Group	$1	N/A	elg_grp	If the Date Dispensed is between the begin and end date of D_ELG_GRP_CD then fill with D_ELG_GRP_CD else leave blank
DEERS Enrollment Group	$1	N/A	enr_grp	If the Date Dispensed is between the begin and end date of D_ENR_GRP_CD then fill with D_ENR_GRP_CD else leave blank
DEERS PCM Type	$1	N/A	pcm_type	If the Date Dispensed is between the begin and end date of D_PCM_TYPE_CD then fill with D_PCM_TYPE_CD else leave blank
DEERS PCM ID	$10	N/A	pcm_id	If the Date Dispensed is between the begin and end date of D_PCM_ID then fill with D_PCM_ID else leave blank
MPI Merge				
Person Association Reason Code	2	N/A	parc	From MPI merge. See MPI specification.

VIII. REFRESH FREQUENCY

Data is updated monthly

IX. DATA MARTS

N/A