**21 July 2014**

Functional Specification for MDR Injury Reference File for the

Centralized Billing Event Repository (CBER)

(Version 1.00.02)

Future Specification

**Revision History**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Version** | **Date**  | **Para/Tbl/Fig** | **Originator** | **Description of Change** |
| 1.00.00 | 2/20/2013 | * Whole Document
 | W. Funk | * Initial version
 |
| 1.00.01 | 6/2/2013 | * Table 1
 | W. Funk | * Changed length of diagnosis codes
 |
| 1.00.02 (on hold) | 7/21/2014 |  | W. Funk | * Changed name of person ID variable reference. Added conditional logic for diagnosis code fields.
 |

**CBER Injury Reference File**

1. Background:

The Centralized Billing Event Repository (CBER) project is intended to create data files that the Services can use to bill for care provided in military treatment facilities, under the following programs: Third Party Collections (TPC), Medical Affirmative Claims (MAC), and MSA (MSA). This processing specification describes the file that is used to identify timeframes for which records associated with the MAC program are identified.

1. Source:

The source for the CBER Injury Reference file is the MDR CAPER.

1. Transmission (Format and Frequency):

No transmission is necessary. The CBER Injury Reference File is prepared from an existing MDR file.

1. Organization and Batching

Output Products: The CBER Injury Reference processor produces a SAS dataset. The file should be stored in mdr/pub/cber/injuryref.sas7bdat. Archival of files is also required, so that corresponding “apub” and other files (i.e., log, aprod, etc) are also loaded into the MDR according to routine operating procedures.

1. Receiving Filters

Records are only included if the injury code is Yes.

1. Update Process

To create the intial injury reference file, the data elements identified in Table 1 are read in from the MDR CAPER for FY 2011 forward and retained only if the injury flag is Yes.

The file is updated whenever the MDR CAPER is updated. To perform the update, remove records for any year where the MDR CAPER has been updated and recreate that year in the same manner as with the initial reference file. Business rules for appended fields that result from the merges above, are described in the body of the table in Section VII.

1. Record Layout and Content

The CBER Injury Reference file is stored in a SAS dataset. Table 1 describes the content and business rules.

Table 1: CBER Injury Reference File

| **Data Element** | **SAS Name** | **CAPER Source Element** | **Format** | **Transformation Rule** |
| --- | --- | --- | --- | --- |
| Person ID | EDI\_PN | EDIPN | $10 | No transformation. |
| Beneficiary SSN | PATSSN | PATSSN | $9 | No transformation. |
| Date of Injury | INJDATE | INJDATE | CCYYMMDD | No transformation |
| Injury Cause Code 1 - 3 | INJCODEn | INJCODEn | $2  | No transformation |
| Injury Geographic Location | INJGEOGLOC | INJGEOGLOC | $5  | No transformation |
| Injury Place of Accident | INJPOA | INJPOA | $54  | No transformation |
| Injury Place of Employment | INJ\_JOB | INJPOE | $54  | No transformation |
| Injury Related Flag | INJFLAG | INJREL | $1  | No transformation |
| Primary Diagnosis | DX1 | DX1 | $7  | If the encounter date is less than <parameter> then substring to first 5 characters, else no transformation. Parameter is currently set at Oct 1, 2015. |
| Secondary Diagnosis n ; n=2 to 10 | DXn | DXn | $7  | If the encounter date is less than <parameter> then substring to first 5 characters, else no transformation. Parameter is currently set at Oct 1, 2015. |
| MTF Reporting Injury  | DMISID | DMISID | $4 | No transformation |
| Appointment ID Number of Injury Report | APPTIEN | APPTIDNO | $10 | No transformation |
| Injury Related Data Start Date | INJ\_START | N/A | SAS Date | Date of Injury – 180 |
| Injury Related Data Stop Date | INJ\_STOP | N/A | SAS Date | Date of Injury + 2 years |
| Encounter Date | ENCDATE | ENCDATE | SAS Date | No transformation |

1. Refresh Frequency

Weekly

1. Quality Review Requirements

In order to ensure processing is done correctly, several basic quality review requirements are presented in this section.

1. Basic Data Flow Process Check: A spreadsheet should be maintained that tracks record counts associated with each data step used in processing. Record counts from the monthly processor should be tracked and significant variations should be noted and explored with BEA.
2. File Size: Record counts should increase as the files are updated for each year.
3. Proc contents should be reviewed and compared against specifications to ensure conformance.
4. Routine feed and file management procedures should be followed for the MDR CBER Injury Reference File processor.
5. Data Marts

N/A

1. Special Outputs

N/A