Longitudinal Eligibility (LELG)
for the
MHS Data Repository (MDR)
(Version 1.00.04)

Current Specification

Revision History

Version	Date	Para/Tbl/Fig	Originator	Description of Change
1.00.00	11/05/2009	• New specification	J. Hufford	
1.00.01	01/14/2010	• File layout	J. Hufford	• Clarified language for MDR Longitudinal Eligibility Field (spelled out ACV and ENR and deleted the null (former FMP) row). • Clarified MDR VM6 Field and Derivation Rules (replacing non-empty with more accurate text) • Added U to criteria in Enrollment Region and Enrollment DMISID. • Changed PCM ID field length to 32 (from 18) • No change to processor by these changes.
1.00.02	04/12/2010	• File Layout	J. MacLeod	• In the Derivation Rules column, modified the list of ACVs being checked to include the value U.
1.00.03	10/2/2017	• Section 6	W. Funk	• Changed sort order. • Added fields related to NDAA 2017 and T2017.
1.00.04	10/4/2017	• Appendix A • Table 1	W. F unk	• Corrected a typo in the ACV Group derivation • Added enrollment region codes. • Replaced ACV with ACV Group in derived fields related to enrollment.

MHS Data Repository (MDR) TRICARE Longitudinal Eligibility

I. Source

Original eligibility and enrollment information is captured in DEERS and transmitted to SDD via the DEERS VM6.

II. Transmission (Format and Frequency)

VM6 beneficiary-level files are processed monthly in the MHS Data Repository (MDR), producing many MDR core files; including the DEERS VSAM MDR VM6 Detail File (VM6). The MDR Longitudinal Eligibility file is prepared using the completed DEERS VM6 file of each month, including those created from walked-back or retrofitted data. Updates may involve more than one fiscal year at a time.

III. Organization and batching

- MDR VM6 files are prepared in the MDR monthly, according to the MDR VM6 Functional Processing Specification referenced above.
- MDR Longitudinal Eligibility files are organized into annual files; with each month's new MDR VM6 serving to update or add new information. MDR Longitudinal Eligibility fiscal year files are processed whenever new information is available in the VM6 for that year.
- MDR Longitudinal Eligibility files should be stored in the following directory in the MDR: /mdr/pub/deers/elg

IV. Receiving Filters

Beneficiaries are uniquely identified in the MDR Longitudinal Eligibility process by the DEERS Patient ID. In preparation for applying each month's new VM6 file to the Longitudinal Eligibility file, the VM6 source files are first limited to eligible, primary records (MHS Elg Indicator and Primary Record Flag). After completing this step, it is necessary that records with duplicate key values in the MDR VM6 be deleted. (Note this deletion is not permanently applied to the MDR VM6; it is only applied to the VM6 for the MDR Longitudinal Eligibility processing). The first choice for de-duplication is the record whose key matches an existing Longitudinal Eligibility record of the same year from the previous month. If none matches or more than one match exists, the last record read is kept. (This step is generally unnecessary for newer years' data, but is included for completeness). Records with missing DEERS Patient IDs are deleted.

V.   Field Transformations

None

VI.   Updating the Master Tables

- Each annual MDR Longitudinal Eligibility table contains a record for each beneficiary that has been MHS Eligible at any time during a given year, up to the most recent month's processed data.
- The MDR Longitudinal Eligibility annual tables are updated each month using the monthly MDR VM6 files.
- The MDR LELG file for a given year is created by taking each monthly VM6 that is available in the year, limiting to primary, eligible records, and then populating data elements according to table 1.
- The final processing step in the preparation or update of the TRICARE MDR Longitudinal Eligibility file is to sort the file by EDIPN.
- LELG files are updated whenever the source data are updated.

VII.   File Layout and Content

The table below reflects the fields as they exist in the monthly MDR Longitudinal Eligibility files following processing.

Table 1

MDR Longitudinal Eligibility Field	SAS Name	MDR VM6 Field and Derivation Rules	Format
DEERS Dependent Suffix[1]	DDS	LEG_DDS_CD	$2
Enrollment T3 Region	ENR_T3_REG	If latest value of ACV_GROUP is not "PR"; "PL" "OP" "DP", or if no eligible record in latest month, then set to blank. Otherwise, use latest reported value for data element D_ENR_T3_RGN_CD in MDR VM6.	$2
Enrollment T2017 Region	ENR_T17_REG	If latest value of ACV_GROUP is not "PR"; "PL" "OP" "DP", or if no eligible record in latest month, then set to blank. Otherwise, use latest reported value for data element D_ENR_T17_RGN_CD in MDR VM6.	$2
Family Sequence ID	FSN	SPN_DUP_ID	$1

---

[1] Legacy DDS on the raw DEERS VM6 record is populated by source file February 2007 and earlier; it is populated by a merge to the February 2007 MPI file for March 2007 through September 2007, and remain unpopulated for FY 2008 and later.

MDR Longitudinal Eligibility Field	SAS Name	MDR VM6 Field and Derivation Rules	Format
Sponsor Branch of Service, Aggregated	SVC	Value reported in most recent DEERS VM6 record on which beneficiary was MHS-eligible, for data element D_SPON_BR_SVC_CD in MDR VM6.	$1
Beneficiary Gender	SEX	Value reported in most recent DEERS VM6 record on which beneficiary was MHS-eligible, for data element PN_SEX_CD in MDR VM6.	$1
Equivalent Lives Beneficiary Group	BCAT	Value reported in most recent DEERS VM6 record on which beneficiary was MHS-eligible,data element MDR_EL_BENGRP in MDR VM6.	$6
Sponsor Social Security Number	SPONSSN	SPN_PN_ID	$9
Date of Birth	DOBNEW	PN_BRTH_DT	$8
Ben Cat Common	COMBEN	Value reported in most recent DEERS VM6 record on which beneficiary was MHS-eligible, for data element D_COM_BEN_CAT_CD in MDR VM6.	$1
Patient Identifier	PATUNIQ	DOD_EDI_PN_ID	$10
Ben Cat Common <month>	BENfm	Derived from COMBEN, FY, and FM. . Set to blank for any month and year for which no eligible record is found in VM6 file.	$1
Alternate Care Value <month>	ACVfm	Derived from MDR_ACV, FY and FM. Set to blank for any month and year for which no eligible record is found in VM6. Blank Fill after 1/1/2018.	$1
Eligibility Group <month>	ELG_GRPfm	Derived from D_ELG_GRP_CD, FY and FM. Set to blank for any month/year in which no eligible record is found.	$2
Enrollment Group <month>	ENR_GRPfm	Derived from D_ENR_GRP_CD, FY and FM. Set to blank for any month/year in which no eligible record is found.	$2
PCM Type <month>	PCM_TYPEfm	Derived from D_PCM_TYPE_CD, FY and FM. Set to blank for any month/year in which no eligible record is found.	$2
Enrollment DMIS ID <month>	ENRfm	Derived from D_MI_PCM_EDVSN_DMIS_ID, FY and FM . Set to blank for any month and year for which no eligible record is found in VM6, or for which ACV_GROUP is not "PR" "PL" "OP" or "DP".	$4

MDR Longitudinal Eligibility Field	SAS Name	MDR VM6 Field and Derivation Rules	Format
Privilege Code	DMEDELG	Value reported in most recent DEERS VM6 record on which beneficiary was MHS-eligible, for data element D_ELG_CD in MDR VM6.	$1
Zip Code	DZIPCD	Value reported in most recent DEERS VM6 record on which beneficiary was MHS-eligible, for data element D_ZIP_CD in MDR VM6.	$5
PCM ID	PCMID	If latest value of ACV_GROUP is not "PL" "PR" "DP" or "OP", or if no eligible record in latest month, then set to blank. Otherwise, use latest reported value for data element D_MI_PCM_ID in MDR VM6.	$32
Catchment Area ID of Record	DCATCH	Value reported in most recent DEERS VM6 record on which beneficiary was MHS-eligible,for data element D_CATCH_AREA_CD in MDR VM6.	$4
PRISM Area ID of Record	DPRISM	Value reported in most recent DEERS VM6 record on which beneficiary was MHS-eligible, for data element D_PRISM_CD in MDR VM6.	$4
Latest fiscal month of data for beneficiary	LASTFM	Month of latest reported MHS eligibility data for a given individual.	$2
HSSC Enrollment Region	DHSSCREG	Value reported in most recent DEERS VM6 record on which beneficiary was MHS-eligible,for data element D_HSSC_ENR_RGN_CD in MDR VM6.	$1
Enrollment T3 Region	ENR_T3_REG	From most recent DEERS VM6.	$2
Enrollment T2017 Region	ENR_T17_REG	From most recent DEERS VM6.	$2
Person Association Reason Code	PNARSN	Value reported in most recent DEERS VM6 record on which beneficiary was MHS-eligible, for data element PNA_RSN_CD in MDR VM6.	$2
Number of Months Eligible	NUM_MONS_ELG	Sum number of months beneficiary is considered MHS eligible in the fiscal year.	3
Beneficiary T3 Region	BEN_T3_REG	From most recent DEERS VM6.	$2
Beneficiary T2017 Region	BEN_T17_REG	From most recent DEERS VM6.	$2
Number of Months Enrolled	NUM_MONS_ENR	Sum number of months beneficiary is considered to be a enrolled in prime (A, B, E, F, H, J, Q for 1/1/2018 and earlier, enrollment group otherwise) in the fiscal year.	3

MDR Longitudinal Eligibility Field	SAS Name	MDR VM6 Field and Derivation Rules	Format
ACV Group <Month>	ACV_GROUPfm	For each month, if the month is later than FY2018, FM4 then if enr_grp is "P" then set to "PR" elseif enr_grp is "L" then set to "PL" elseif enr_group="U" then set to "DP" elseif (bencat common=4 and pcm_type=N) then "R" elseif pcm_type="O" then "R" elseif elg_grp in ("R" "S") then "O" else "O". For FY and FMs prior to 1/1/2018, see appendix.	$2

VIII.   Refresh Frequency

MDR Longitudinal Eligibility FY files are refreshed monthly or whenever new VM6 files are available. At that time, MDR Longitudinal Eligibility FY files are no longer refreshed, unless a data quality error is discovered.

IX.   Special Outputs

The MDR Longitudinal Eligibility file is used to prepare an extract for the M2.

X.   Data Quality Control

The processor should conduct monthly quality assurance checks to ensure input and output data are valid, complete, and reliable. At a minimum, the processor should:

- Ensure LELG monthly primary, eligible beneficiary counts match VM6 primary, eligible counts
- Compare monthly enrollment counts from the LELG with monthly TRICARE Relationship File enrollment counts to ensure accuracy (where ACV<FM> is populated and not Z)
- For each month of VM6 data read in, ensure frequency counts of included variables match LELG output for beneficiaries included in each month (where BEN<FM> is not blank).
- Determine that file size differences on a monthly basis appear appropriate
- Evaluate post-processing values for data that appear out of the ordinary, or not consistent with SME expected values (face validity)

Appendix A:

Fill each monthly ACV Group field prior to 1/1/2018 as follows:
For FY03 and before:
If ACV = A, D, or E then "PR"
Else if ACV = G or L then "PL"
Else if ACV = U then "DP"
Else if Ben Cat Common = 4 then "R"
Else "O"

For FY04 up until 1/1/2018:
If ACV = A, E, H, or J then "PR"

Else if ACV = B or F then "OP"
Else if ACV = G or L then "PL"
Else if ACV = U then "DP"
Else if ACV = R or V then "O"
Else if ACV = M or Q then "R"
Else if Ben Cat Common = 4 then "R"
Else "O"