

**Fee List for RIFs: Physical Research Data Request**  
(fees are per year of data)

<b>Project Fee</b>	
Initial Project Fee *	\$20,000
Project Renewal Fee (payable at DUA renewal date)*	\$10,000

\*Effective August 19, 2024, CMS is implementing a new annual Project Fee.

<b>Finder Files/Crosswalk Files</b>	<b>Fee</b>
Researcher provides beneficiary identifiers (1-2 finder files)	\$0
Simple algorithm to identify cohort (programming and processing of cohort only requires a single pass through the data)	\$2,500
Complex algorithm to identify cohort or submission of 3 or more finder files (programming and processing of cohort requires a multi-step approach)	\$5,000
Crosswalk File (requested independently of other data files)	\$1,000
Part D Plan Bridge File	\$0
Part D Event Bridge File	\$2,000

<b>Medicare Files (include enrollment data)</b>	<b>Beneficiary Count</b>			
	<b>Up to 1M</b>	<b>1-5M</b>	<b>5-20M</b>	<b>20M+</b>
Medicare Provider Analysis and Review (MEDPAR)	\$2,000	\$2,500	\$3,000	\$5,000
Inpatient claims**	\$2,000	\$3,000	\$6,000	\$12,000
Outpatient claims**	\$2,000	\$5,000	\$10,000	\$15,000
Carrier claims**	\$4,000	\$12,000	\$20,000	n/a
Other claim files: Home Health, Hospice, Skilled Nursing Facility, Durable Medical Equipment (prices are per file type)**	\$2,000	\$2,500	\$3,000	\$5,000
Part D event data	\$5,000	\$10,000	\$15,000	n/a
Part D characteristic files (pharmacy, prescriber and formulary) – fee listed is per file type	\$1,000	\$1,000	\$1,000	n/a
Part D Medication Therapy Management file	\$1,000	\$1,000	\$1,000	\$1,000
Part D Plan Election Type Beneficiary Summary File	\$1,000	\$1,000	\$1,000	\$1,000
<b>Beneficiary-Level Files</b>				
Master Beneficiary Summary File (MBSF)				
<ul style="list-style-type: none"> <li>• Base Segment (no fee if requesting claims data)*</li> </ul>	\$0	\$0	\$0	\$0
<ul style="list-style-type: none"> <li>• Base Segment (stand-alone)**</li> </ul>	\$1,000	\$1,000	\$1,000	\$1,000
<ul style="list-style-type: none"> <li>• Chronic Conditions (27)***</li> </ul>	\$200	\$500	\$500	\$1,000
<ul style="list-style-type: none"> <li>• Chronic Conditions (30)***</li> </ul>	\$200	\$500	\$500	\$1,000
<ul style="list-style-type: none"> <li>• Other Chronic or Potentially Disabling Conditions</li> </ul>	\$200	\$500	\$500	\$1,000
<ul style="list-style-type: none"> <li>• Cost and Utilization</li> </ul>	\$300	\$1,000	\$1,500	\$2,000
Plan Characteristics File (formerly titled Part D Plan Characteristics file)	\$1,000	\$1,000	\$1,000	n/a
Vital Status File	\$1,000	\$2,000	\$2,500	\$3,000
Enrollment Data Base User View	\$2,000	\$2,500	\$3,000	\$3,500
Risk Score Base File	\$300	\$1,000	\$1,500	\$2,000
Risk Score Detail Files	\$1,200	\$3,000	\$4,500	\$6,000
HEDIS Files	\$2,000	\$2,500	\$3,000	\$5,000

Medicare Bayesian Improved Surname Geocoding (MBISG)	\$200	\$500	\$500	\$1,000
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\*\*These file types are available on a quarterly basis. The fee for the first quarterly extract of the requested year of data is above. Each subsequent quarter of data will be 50% of the fee for those files.

\*\*\*Chronic conditions (30) file is a new MBSF segment available beginning with 2017 data. If both Chronic conditions files (27) and (30) are requested at the same time, the fee is only charged for one of the files.

<b>Part C Medicare Advantage Encounter Data<sup>+</sup></b>		<b>Beneficiary Count</b>			
	<b>Up to 1M</b>	<b>1-5M</b>	<b>5-20M</b>	<b>20M+</b>	
Inpatient Records	\$1,500	\$2,000	\$4,000	\$9,000	
Skilled Nursing Facility Records	\$1,500	\$2,000	\$2,500	\$3,500	
Home Health Records	\$1,500	\$2,000	\$2,500	\$3,500	
Outpatient Records	\$1,500	\$3,500	\$8,000	\$12,000	
Carrier Records	\$2,500	\$7,000	\$12,000	n/a	
Durable Medical Equipment Records	\$1,500	\$2,000	\$2,500	\$3,500	
*Effective August 2024, Encounter files available in a preliminary status prior to the final file availability are for VRDC access only.					
<b>Medicaid Files</b>		<b>Beneficiary Count</b>			
	<b>Up to 1M</b>	<b>1-5M</b>	<b>5-20M</b>	<b>20M+</b>	
MAX Person Summary	\$2,000	\$2,500	\$4,000	\$8,000	
MAX Inpatient	\$2,000	\$2,500	\$3,000	\$4,000	
MAX Prescription Drug	\$2,000	\$2,500	\$5,000	\$7,000	
MAX Other Services/Other Therapy	\$2,000	\$2,500	\$5,000	\$10,000	
MAX Long-Term Care	\$2,000	\$2,500	\$3,000	\$6,000	
Medicaid Enrollee Supplemental File - Chronic Conditions	\$200	\$500	\$500	\$1,000	
<b>T-MSIS Analytic Files (TAF)<sup>++</sup></b>		<b>Beneficiary Count</b>			
	<b>Up to 1M</b>	<b>1-5M</b>	<b>5-20M</b>	<b>20M+</b>	
Demographic and Eligibility (DE)	\$3,500	\$4,000	\$7,000	\$14,000	
Inpatient Hospital (IP)	\$3,000	\$4,000	\$5,000	\$6,300	
Prescription Drug (RX)	\$4,000	\$5,000	\$10,000	\$12,500	
Other Services (OT)	\$4,000	\$5,000	\$10,000	\$20,000	
Long Term Care (LT)	\$4,000	\$5,500	\$6,500	\$13,000	
Annual Provider (APR)	\$1,500	n/a	n/a	n/a	
Annual Plan (APL)	\$1,000	n/a	n/a	n/a	
**Effective August 2024, TAF files available in a preliminary status prior to the final file availability are for VRDC access only.					

<b>Other Files</b>	<b>Beneficiary Count</b>			
	<b>Up to 1M</b>	<b>1-5M</b>	<b>5-20M</b>	<b>20M+</b>
Assessment data: OASIS, Swing Bed, MDS, and IRF-PAI (prices are per file type) processed by CCW contractor	\$2,000	\$2,500	\$3,000	\$5,000
Assessment data: SPADE	\$2,000	\$2,000	\$2,000	\$2,000
Medicare/Medicaid Linked Enrollee Analytic Data Source (MMLEADS) (2006-2012)	\$2,500	\$5,000	\$7,500	\$14,000
Medicare/Medicaid Linked Enrollee Analytic Data Source (MMLEADS) – Beneficiary Summary File (2016 forward)	\$1,275	\$2,100	\$3,200	\$4,500
Medicare/Medicaid Linked Enrollee Analytic Data Source (MMLEADS) – Cost and Use Summary File (2016 forward)	\$1,000	\$1,650	\$2,500	\$3,500
Medicare Data on Physician Practice and Specialty (MD-PPAS)	\$600	n/a	n/a	n/a
ACO Beneficiary Level File Shared Savings Program* or Pioneer	\$2,000	\$2,500	\$3000	n/a
ACO Provider Level File Shared Savings Program or Pioneer	\$1,000	n/a	n/a	n/a
ACO Settlement Level File Pioneer only	\$1,500	n/a	n/a	n/a
Comprehensive ESRD Care Model – Beneficiary File	\$2,000	\$2,500	\$3,000	n/a
Comprehensive ESRD Care Model – Provider File	\$1,000	n/a	n/a	n/a
CMMI Model Data Sharing – Beneficiary, Provider and Entity Files	\$3,500	\$4,000	\$4,300	\$4,700
Next Generation ACO – Beneficiary File	\$2,000	\$2,500	\$3,000	n/a
Next Generation ACO – Provider File	\$1,000	n/a	n/a	n/a
Million Hearts Cardiovascular Disease (CVD) Risk Reduction Model Medicare Data Files	\$5,000	n/a	n/a	n/a
Acute Hospital Care at Home (AHCAH) Hospital and Patient Data	\$5,000	n/a	n/a	n/a
Value Modifier – Beneficiary File	\$3,500	n/a	n/a	n/a
Value Modifier – NPI Practice Level File	\$2,500	n/a	n/a	n/a
Value Modifier – Practice Level File	\$1,500	n/a	n/a	n/a
MCAHPS Fee-for-Service File	\$3,500	n/a	n/a	n/a
MCAHPS MA-PDP File	\$3,500	n/a	n/a	n/a

**Fee List for LDS**  
(fees are per year of data)

Limited Data Set File	Fee Per Year		Fee Per Quarter	
	5%	100%	5%	100%
Master Beneficiary Summary File	\$250	\$1,000	\$150	\$625
Denominator File	\$250	\$1,000	\$150	\$625
Carrier Standard Analytic File	\$1,700	n/a	\$1,075	n/a
Durable Medical Equipment Standard Analytic File	\$800	n/a	\$500	n/a
Home Health Standard Analytic File	\$300	\$2,000	\$200	\$1,250
Hospice Standard Analytic File	\$300	\$1,000	\$200	\$625
Inpatient Standard Analytic File	\$400	\$3,000	\$250	\$1,875
Outpatient Standard Analytic File	\$1,000	\$7,000	\$625	\$4,375
Skilled Nursing Facility Standard Analytic File	\$300	\$1,000	\$200	\$625
Inpatient Psychiatric Prospective Payment System (IPF PPS)	n/a	\$3,000		
Hospital Outpatient Prospective Payment System (OPPS), Proposed Rule	n/a	\$3,000		
Hospital Outpatient Prospective Payment System (OPPS), Final Rule	n/a	\$3,000		
OPPS Partial Hospitalization Program, Proposed Rule	n/a	\$1,000		
OPPS Partial Hospitalization Program, Final Rule	n/a	\$1,000		
Medicare Provider Analysis and Review (MedPAR) Hospital National, final rule	n/a	\$3,600		
MedPAR Hospital National, Proposed Rule	n/a	\$3,600		
MedPAR – FY08 ¾ year Expanded Modified	n/a	\$3,600		
MedPAR Long Term Care Hospital – PPS Expanded Modified	n/a	\$100		
MedPAR Long Term Care Hospital, Proposed Rule	n/a	\$100		
MedPAR Skilled Nursing Facility	n/a	\$650		
Ambulatory Surgical Center (ASC), Proposed Rule	n/a	\$1,500		
ASC, Final Rule	n/a	\$1,500		
Nationwide Adult Medicaid CAHPS	n/a	\$600		
Carrier (DATE) Standard Analytic File	\$200	n/a		
Durable Medical Equipment (DATE) Standard Analytic File	\$100	n/a		
Home Health Agency (DATE) Standard Analytic File	\$100	\$300		
Hospice (DATE) Standard Analytic File	\$100	\$200		
Inpatient (DATE) Standard Analytic File	\$100	\$400		
Outpatient (DATE) Standard Analytic File	\$150	\$850		
Skilled Nursing Facility (DATE) Standard Analytic File	\$100	\$200		
MCBS (per file type): Cost and Use, Access to Care, or Survey + Cost Supplement (MCBS Survey file only is \$300)	n/a	\$600		
HOS Annual File	n/a	\$250		
HOS Analytic File	n/a	\$250		
Implantable Cardioverter Defibrillator (ICD) Implantation	n/a	\$600		
Home Health – OASIS File (2017-2021)	n/a	\$1,200		
Home Health – OASIS File (2022 and forward)	n/a	\$1,500		
EDGE File	n/a	\$1,500		