Instructions for completing the RIF Application

This document: All requesters of Research Identifiable File (RIF) data must complete a RIF application. It collects information about the requester, the proposed use including detailed study aims, data required, and dissemination of findings plan. These instructions are for **new requests only**.

General Instructions

1. Answer every item in the document.
2. Do not alter the layout or content of the document.
3. Submit to ResDAC in Word format.

Specific Instructions

A

Enter the name of the Requester listed on the RIF Data Use Agreement (DUA). The **Requester** is the individual authorized to sign agreements on behalf of the requesting organization. This person is often referred to as the 'legal signatory'. This person accepts all terms and conditions in the DUA and attests that all information contained in the request is accurate.

B

Enter the exact legal name of the Requesting Organization listed on the RIF DUA in section 1.

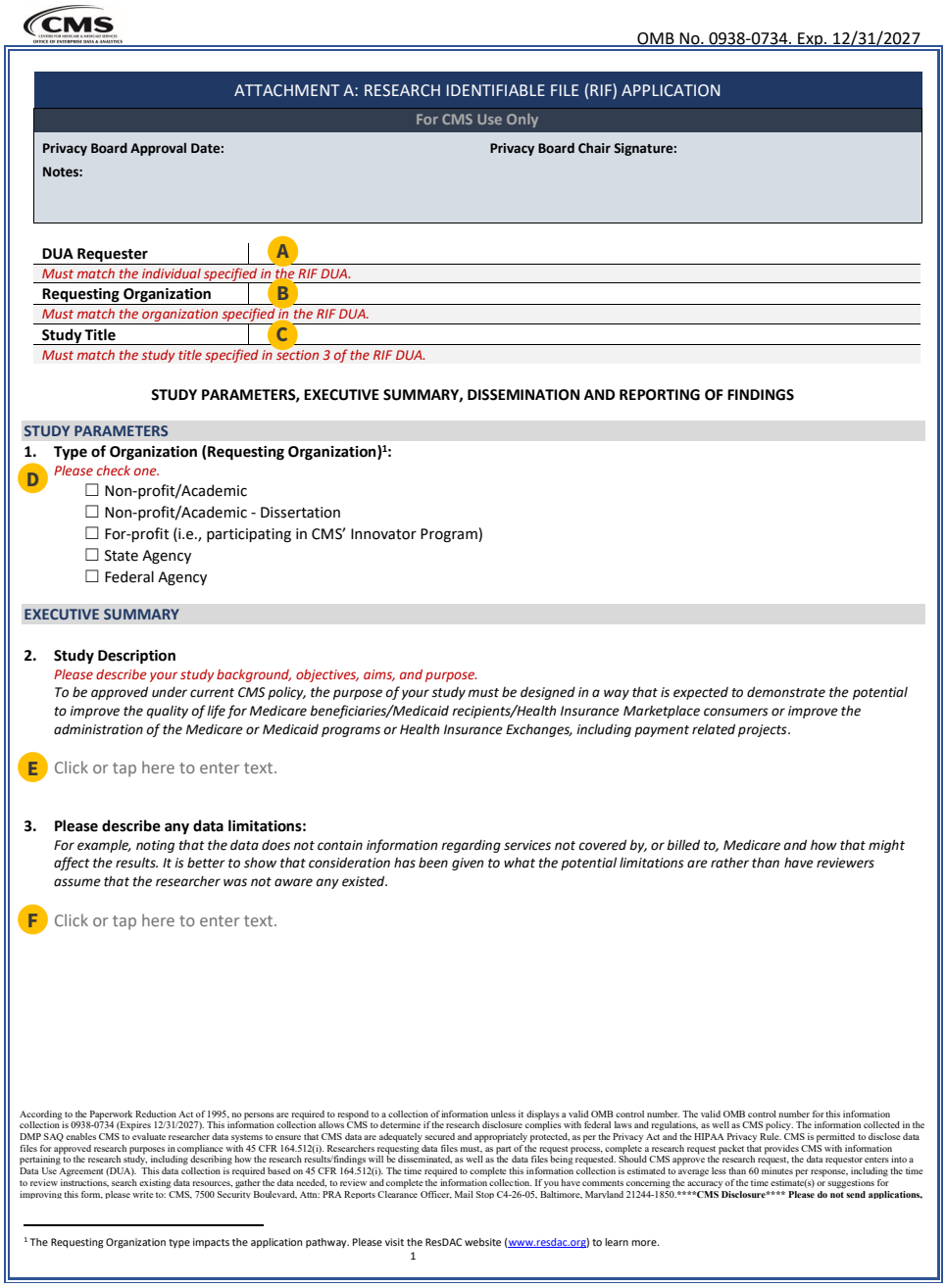
C

Enter the exact Study Title listed on the RIF DUA in section 3.

D

Check only one box.

(Instructions continue on page 2)



CMS

OMB No. 0938-0734. Exp. 12/31/2027

ATTACHMENT A: RESEARCH IDENTIFIABLE FILE (RIF) APPLICATION

For CMS Use Only

Privacy Board Approval Date: **Privacy Board Chair Signature:**

Notes:

DUA Requester	A
Must match the individual specified in the RIF DUA.	
Requesting Organization	B
Must match the organization specified in the RIF DUA.	
Study Title	C
Must match the study title specified in section 3 of the RIF DUA.	

STUDY PARAMETERS, EXECUTIVE SUMMARY, DISSEMINATION AND REPORTING OF FINDINGS

STUDY PARAMETERS

1. **Type of Organization (Requesting Organization)[1]:**

D *Please check one.*

- ☐ Non-profit/Academic
- ☐ Non-profit/Academic - Dissertation
- ☐ For-profit (i.e., participating in CMS' Innovator Program)
- ☐ State Agency
- ☐ Federal Agency

EXECUTIVE SUMMARY

2. **Study Description**

Please describe your study background, objectives, aims, and purpose.
To be approved under current CMS policy, the purpose of your study must be designed in a way that is expected to demonstrate the potential to improve the quality of life for Medicare beneficiaries/Medicaid recipients/Health Insurance Marketplace consumers or improve the administration of the Medicare or Medicaid programs or Health Insurance Exchanges, including payment related projects.

E Click or tap here to enter text.

3. **Please describe any data limitations:**

For example, noting that the data does not contain information regarding services not covered by, or billed to, Medicare and how that might affect the results. It is better to show that consideration has been given to what the potential limitations are rather than have reviewers assume that the researcher was not aware any existed.

F Click or tap here to enter text.

[1] The Requesting Organization type impacts the application pathway. Please visit the ResDAC website (www.resdac.org) to learn more.

1

E

In at least three to four paragraphs, provide a comprehensive description of the proposed study that includes:

- Brief background
- Clear objectives and aims
- Clear statement of the study purpose

F

In one to two paragraphs, clearly describe any limitations to the requested data for the study purposes and how those limitations will be overcome.

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G

Each row must only contain a single combination of exact file name, cohort and DUA. If a request has more than one combination for a specific file name, each needs to be a separate row. If additional rows are needed, click in the last row of the table, then on the '+' in the lower right area of the table. The contents of this table must be consistent with the specification worksheet.

H1

Insert the full file name. Only include one file name per row.

H2

In one to two sentences, describe how the file will be used in your study.

H3

Insert the years/quarters of data currently being requested. Do not add future data that is not currently available for request, as noted in the ResDAC file availability table.

H4

Select from the drop down menu whether the data are a % cohort, such as a 5%, 20%, 100%, or a custom cohort.

H5

If reusing data, enter the DUA number you are reusing from. Otherwise, leave blank.

H6

Indicate whether you will receive physical data or use the VRDC.

(Instructions continue on page 4)

ATTACHMENT A: RESEARCH IDENTIFIABLE FILE (RIF) APPLICATION

4. Data Files Needed

For each file, record the data file name, justification for requesting the data file, frequency of data being requested, indicate if the data being requested can be framed as a reuse of data obtained (or a subset of such data) under an existing DUA, if so from what DUA, the cohort of the data requested (ex: 5%, 20%, 100%, custom cohort), and the method of dissemination.

G *Add rows to the table as needed by clicking on the '+' in the lower right of the table.*

Data File Name	Justification for how each data file will be used in the analysis	Years/Quarters Requested[2]	Cohort	DUA # (reuse only)	Dissemination
H1	H2	H3	H4	H5	H6

5. Please describe your cohort and how it is the minimum necessary to achieve your research objectives.

Include estimated cohort size.

I Click or tap here to enter text.

6. If this study will require future years of CMS data that are not yet available for request, please list those CMS data files and years that will be required for the *entire scope of your study*

(Note: Approval of data files for years that are not yet available will NOT be granted at this time, the information included here will simply provide CMS with an overview of your study).

J Click or tap here to enter text.

7. Please list any other data files or sources of information that you are planning to use to support your research study. (e.g., Provider of Services (POS) file, AMA Physician Master file, etc.). If you will be linking or attempting to link to the CMS files specified in section 5, please describe how you will be linking the data.

Name of additional files	Purpose for using the data file in the analysis	If linking to CMS data, describe how linkage will occur
K	L	M

[2] Please refer to the ResDAC website for information on data file availability.

2

I

Describe the criteria used to define the cohort for the project and how the data being requested is the minimum amount of data needed to complete the study. Include the estimated cohort size (when known).

J

List the CMS data files and years not currently available that will be requested in the future. This helps CMS understand the scope of the study.

K

List non-CMS data files or CMS public use files that will be used with the data or linked to the data. Leave blank if there are none.

L

For each file, specify in one to two sentences how the data will be used.

M

In one to two sentences, clearly describe how any linking will occur. Include a description of the identifiers/ data elements needed for the linkage. If not linking, insert N/A.

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Name of additional files	Purpose for using the data file in the analysis	If linking to CMS data, describe how linkage will occur
K	L	M

[2] Please refer to the ResDAC website for information on data file availability.

2

N

Note all relevant supplements you will be completing for this request.

O

Read statement and check the box.

P

Check the first box if using the VRDC or the second box if requesting physical data.

Q

Review statement and check the box to agree.

R

In one to two paragraphs, provide a description of how you will make the findings available to the public. Describe in detail how and where the study findings will be made available to the public and include the names of the scientific journals or conferences that will be targeted. Use strong, affirmative language such as "Results will be..." or "We will submit".

ATTACHMENT A: RESEARCH IDENTIFIABLE FILE (RIF) APPLICATION

8. Please check all that are applicable to your data request and ensure that the relevant supplements are completed
(Note: The supplements will be incorporated by reference into the Data Use Agreement; the Key Personnel Supplement is not listed since it is required for all Data Use Agreements):

N
- ☐ CMS Innovator Program Supplement
- ☐ State Agency Supplement
- ☐ Collaborating Organization Supplement

9. The Requesting Organization attests that they will limit data sharing with any entity to analytic results that meet the CMS cell suppression policy and are de-identified under the HIPAA Privacy Rule as described at 45 CFR 164.514(b) and will retain the right to independently prepare publications of the study results. Any aggregated analytic results that are shared must be limited to only interim results that support the research results that will be made publicly available.

O ☐ I attest

10. If researchers from the Requesting Organization will be accessing CMS data in the Virtual Research Data Center (VRDC), the Requester attests that they understand and will adhere to the CMS VRDC Terms of Use and the CMS VRDC Output Review Policy and will submit a signed DUA Signature Addendum for Research Identifiable Files Acquired from CMS for each VRDC Seat Holder.

P
- ☐ I attest
- ☐ Not applicable, researchers will not be accessing CMS data in the Virtual Research Data Center

DISSEMINATION AND REPORTING OF FINDINGS

11. From sections 5 (b) and (c) of the CMS DUA, "As a condition of its receipt of CMS data, the Requesting Organization affirms that it will ensure that its own and any contractors, agents, and/or collaborators use of any data received under this agreement and other documents governing this data disclosure, or any derivative data, in the creation of any document (manuscript, table, chart, study, report, etc.) will be de-identified under the HIPAA Privacy Rule as described at 45 CFR 164.514(b) and adhere to CMS policy for cell size suppression. This policy stipulates that no beneficiary(ies)-related data cell (e.g., admittances, discharges, patients) with a size of 1-10 will be used in publication or other forms of dissemination. The Requesting Organization will also ensure that no use of percentages or other mathematical formulas will be used in publications or other forms of dissemination if they result in the display of a beneficiary(ies)-related data cell with a size of 1-10. "

Q ☐ I agree.

12. What are your plans for publicly disseminating the findings from your analysis, including specific media through which you will report results?

R

Click or tap here to enter text.