

# RxDC Data Dictionary for the 2022 Reference Year

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## 1. Data Type Key

Data Type	Description
char(N)	Alphanumeric string with exactly N characters
varchar(N)	Alphanumeric string with no more than N characters
tinyint	Whole numbers from 0 to 255
smallint	Whole numbers between -32,768 and 32,767
int	Whole numbers between -2,147,483,648 and 2,147,483,647
numeric(P,S)	Numbers from $-10^{38} + 1$ to $10^{38} - 1$ . P is the maximum number of digits, including digits on either side of the decimal place. S is the maximum number of digits to the right of the decimal point.
date	Date in MM/DD/YYYY format.

## 2. Data Dictionary

### 2.1 Plan Lists

#### P1 Individual and Student Market Plan List

Note: Each row in P1 should have a unique combination of HIOS Plan ID and plan year beginning date.

Template Name	Column Name	Data Type	Instructions
P1: Individual and Student Market Plan List	HIOS Plan Name	varchar(100)	<b>Do not enter more than one value.</b>
P1: Individual and Student Market Plan List	HIOS Plan ID	varchar(25)	14-digit HIOS Plan ID. Ex: 12345NY1234567. <b>Do not enter more than one value.</b> Note: Some grandfathered plans and student health plans currently don't have HIOS IDs. If a plan doesn't have a HIOS Plan ID, follow the instructions in Section 4.2 of the RxDC reporting form instructions at <a href="https://www.cms.gov/CCIIO/Programs-and-Initiatives/Other-Insurance-Protections/Prescription-Drug-Data-Collection">https://www.cms.gov/CCIIO/Programs-and-Initiatives/Other-Insurance-Protections/Prescription-Drug-Data-Collection</a> .

Template Name	Column Name	Data Type	Instructions
P1: Individual and Student Market Plan List	Plan Year Beginning Date	date	MM/DD/YYYY <b>Do not enter more than one value.</b>
P1: Individual and Student Market Plan List	Plan Year End Date	date	MM/DD/YYYY <b>Do not enter more than one value.</b>
P1: Individual and Student Market Plan List	Market Segment	varchar (100)	<u>Valid Values:</u> Individual market Student market <b>Do not enter more than one value.</b>
P1: Individual and Student Market Plan List	Members as of 12/31 of the Reference Year	int	The number of enrollees on the last day of the reference year. If a plan ended before the last day of the reference year, enter 0.
P1: Individual and Student Market Plan List	PBM Name	varchar(2048)	If there is more than one value, separate them with a semicolon.
P1: Individual and Student Market Plan List	PBM EIN	varchar(2048)	9-digit EIN. Include leading zeros if your EIN is fewer than 9 digits. Do not use dashes. Ex: 001234567. If there is more than one value, separate them with a semicolon.
P1: Individual and Student Market Plan List	Included in D1 Premium and Life Years? (1= Yes; 0 = No)	smallint	<u>Valid Values:</u> 0 1
P1: Individual and Student Market Plan List	Included in D2 Spending by Category? (1= Yes; 0 = No)	smallint	<u>Valid Values:</u> 0 1
P1: Individual and Student Market Plan List	Included in D3 Top 50 Most Frequent Brand Drugs? (1= Yes; 0 = No)	smallint	<u>Valid Values:</u> 0 1
P1: Individual and Student Market Plan List	Included in D4 Top 50 Most Costly Drugs? (1= Yes; 0 = No)	smallint	<u>Valid Values:</u> 0 1
P1: Individual and Student Market Plan List	Included in D5 Top 50 Drugs by Spending Increase? (1= Yes; 0 = No)	smallint	<u>Valid Values:</u> 0 1
P1: Individual and Student Market Plan List	Included in D6 Rx Totals? (1= Yes; 0 = No)	smallint	<u>Valid Values:</u> 0 1
P1: Individual and Student Market Plan List	Included in D7 Rx Rebates by Therapeutic Class? (1= Yes; 0 = No)	smallint	<u>Valid Values:</u> 0 1

Template Name	Column Name	Data Type	Instructions
P1: Individual and Student Market Plan List	Included in D8 Rx Rebates for the Top 25 Drugs? (1= Yes; 0 = No)	smallint	Valid Values: 0 1

## P2 Group Health Plan List

Each row should have a unique combination of Group Health Plan Number, plan year beginning date, and plan sponsor EIN.

Template Name	Column Name	Data Type	Instructions
P2: Group Health Plan List	Group Health Plan Name	varchar(512)	Do not include FEHB plans.
P2: Group Health Plan List	Group Health Plan Number	varchar(25)	Enter a <b>unique</b> plan identification number. You can use the identification number in your own database or any other numbering sequence as long as there is a unique plan ID number for every plan. You may use the Form 5500 Plan Number.
P2: Group Health Plan List	Carve-out Description	varchar(2048)	If there is a carve-out benefit, describe it here.
P2: Group Health Plan List	Form 5500 Plan Number	varchar(1024)	If applicable, enter the 3-digit plan number reported on the IRS Form 5500 filed with the Department of Labor. If there is more than one value, separate them with a semicolon.
P2: Group Health Plan List	States in which the plan is offered	varchar(200)	Enter the state(s) in which the plan or coverage is offered using 2-character state postal code. <sup>1</sup> If there is more than one state, separate them with a semicolon. For example: AL; AK; MA. If a plan is offered in every state and in DC, enter "National". If a plan is offered nationally and also in the territories, enter "National" as well as the 2-character postal code for the territories, separated by a semicolon. For example: National; PR; GU.
P2: Group Health Plan List	Market Segment	varchar (512)	<u>Valid Values:</u> Small group market Large group market SF small employer plans SF large employer plans For mixed-funded plans, enter both markets and separate them with a semicolon.
P2: Group Health Plan List	Plan Year Beginning Date	date	MM/DD/YYYY If a plan has a non-calendar plan year and renews during the calendar year, use two rows in the plan list file. (One row for the

<sup>1</sup> In these instructions, the term "State" includes the District of Columbia and the U.S. territories.

Template Name	Column Name	Data Type	Instructions
			plan year that ended in the reference year and another for the plan year that began during the reference year.)
P2: Group Health Plan List	Plan Year End Date	date	MM/DD/YYYY If a plan has a non-calendar plan year and renews during the calendar year, use two rows in the plan list file. (One row for the plan year that ended in the reference year and another for the plan year that began during the reference year.)
P2: Group Health Plan List	Members as of 12/31 of the reference year	int	The number of members with coverage, including dependents, on the last day of the reference year. If a plan ended before the last day of the reference year, enter 0.
P2: Group Health Plan List	Plan Sponsor Name	varchar(2048)	Enter the plan sponsor or client name. If there is more than one value, separate them with a semicolon.
P2: Group Health Plan List	Plan Sponsor EIN	varchar(2048)	Enter the 9-digit EIN. Include leading zeros if your EIN is fewer than 9 digits. Do not use dashes. Ex: 001234567. If there is more than one value, separate them with a semicolon.
P2: Group Health Plan List	Issuer Name	varchar(2048)	If there is more than one value, separate them with a semicolon.
P2: Group Health Plan List	Issuer EIN	varchar(2048)	Enter the 9-digit EIN. Include leading zeros if your EIN is fewer than 9 digits. Do not use dashes. Ex: 001234567. If there is more than one value, separate them with a semicolon.
P2: Group Health Plan List	TPA Name	varchar(2048)	If there is more than one value, separate them with a semicolon.
P2: Group Health Plan List	TPA EIN	varchar(2048)	Enter the 9-digit EIN. Include leading zeros if your EIN is fewer than 9 digits. Do not use dashes. Ex: 001234567. If there is more than one value, separate them with a semicolon.
P2: Group Health Plan List	PBM Name	varchar(2048)	If there is more than one value, separate them with a semicolon.
P2: Group Health Plan List	PBM EIN	varchar(2048)	Enter the 9-digit EIN. Include leading zeros if your EIN is fewer than 9 digits. Do not use dashes. Ex: 001234567. If there is more than one value, separate them with a semicolon.
P2: Group Health Plan List	Included in D1 Premium and Life Years? (1= Yes; 0 = No)	smallint	Valid Values: 0 1
P2: Group Health Plan List	Included in D2 Spending by Category? (1= Yes; 0 = No)	smallint	Valid Values: 0 1
P2: Group Health Plan List	Included in D3 Top 50 Most Frequent Brand Drugs? (1= Yes; 0 = No)	smallint	Valid Values: 0 1

Template Name	Column Name	Data Type	Instructions
P2: Group Health Plan List	Included in D4 Top 50 Most Costly Drugs? (1= Yes; 0 = No)	smallint	Valid Values: 0 1
P2: Group Health Plan List	Included in D5 Top 50 Drugs by Spending Increase? (1= Yes; 0 = No)	smallint	Valid Values: 0 1
P2: Group Health Plan List	Included in D6 Rx Totals? (1= Yes; 0 = No)	smallint	Valid Values: 0 1
P2: Group Health Plan List	Included in D7 Rx Rebates by Therapeutic Class? (1= Yes; 0 = No)	smallint	Valid Values: 0 1
P2: Group Health Plan List	Included in D8 Rx Rebates for the Top 25 Drugs? (1= Yes; 0 = No)	smallint	Valid Values: 0 1

### P3 FEHB Plan List

Each row should have a unique combination of FEHB contract number, FEHB plan code, and plan year beginning date

Template Name	Column Name	Data Type	Instructions
P3: FEHB Plan List	FEHB Plan Name	varchar(512)	
P3: FEHB Plan List	FEHB Contract Number	varchar(512)	Enter the FEHB Contract ID.
P3: FEHB Plan List	FEHB Plan Code	varchar(512)	Enter the two-digit FEHB plan code as it appears in the FEHB plan brochure. Separate each two-digit plan code with a semicolon. Ex: 4A; 4B; 4E; 4L.
P3: FEHB Plan List	States in which the plan is offered	varchar(200)	Enter the states and territories in which the plan is offered using the 2-character postal code. If there is more than one state or territory, separate them with a semicolon. For example: AL; AK; MA. If a plan is offered in every state and in DC, enter "National". If a plan is offered nationally and also in the territories, enter "National" as well as the 2-character postal code for the territories, separated by a semicolon. For example: National; PR; GU.
P3: FEHB Plan List	Plan Year Beginning Date	date	MM/DD/YYYY <b>Do not enter more than one value.</b>
P3: FEHB Plan List	Plan Year End Date	date	MM/DD/YYYY

Template Name	Column Name	Data Type	Instructions
			<b>Do not enter more than one value.</b>
P3: FEHB Plan List	Members as of 12/31 of the reference year	int	The number of FEHB covered individuals, including dependents, on the last day of the reference year. If the plan ended before the last day of the reference year, enter 0.
P3: FEHB Plan List	FEHB Carrier Name	varchar(2048)	
P3: FEHB Plan List	FEHB Carrier EIN	varchar(2048)	9-digit EIN. Include leading zeros if your EIN is fewer than 9 digits. Do not use dashes. Ex: 001234567.
P3: FEHB Plan List	Affiliate Name	varchar(2048)	(If different from the FEHB carrier.) If there is more than one value, separate them with a semicolon.
P3: FEHB Plan List	Affiliate EIN	varchar(2048)	(If different from the FEHB carrier.) Enter the 9-digit EIN. Include leading zeros if your EIN is fewer than 9 digits. Do not use dashes. Ex: 001234567. If there is more than one value, separate them with a semicolon.
P3: FEHB Plan List	TPA or other Third Party Name	varchar(2048)	(If different from the FEHB carrier.) If there is more than one value, separate them with a semicolon.
P3: FEHB Plan List	TPA or other Third Party EIN	varchar(2048)	(If different from the FEHB carrier.) Enter the 9-digit EIN. Include leading zeros if your EIN is fewer than 9 digits. Do not use dashes. Ex: 001234567. If there is more than one value, separate them with a semicolon.
P3: FEHB Plan List	PBM Name	varchar(2048)	(If different from the FEHB carrier.) If there is more than one value, separate them with a semicolon.
P3: FEHB Plan List	PBM EIN	varchar(2048)	(If different from the FEHB carrier.) Enter the 9-digit EIN. Include leading zeros if your EIN is fewer than 9 digits. Do not use dashes. Ex: 001234567. If there is more than one value, separate them with a semicolon.
P3: FEHB Plan List	Included in D1 Premium and Life Years? (1= Yes; 0 = No)	smallint	Valid Values: 0 1
P3: FEHB Plan List	Included in D2 Spending by Category? (1= Yes; 0 = No)	smallint	Valid Values: 0 1
P3: FEHB Plan List	Included in D3 Top 50 Most Frequent Brand Drugs? (1= Yes; 0 = No)	smallint	Valid Values: 0 1
P3: FEHB Plan List	Included in D4 Top 50 Most Costly Drugs? (1= Yes; 0 = No)	smallint	Valid Values: 0 1

Template Name	Column Name	Data Type	Instructions
P3: FEHB Plan List	Included in D5 Top 50 Drugs by Spending Increase? (1= Yes; 0 = No)	smallint	Valid Values: 0 1
P3: FEHB Plan List	Included in D6 Rx Totals? (1= Yes; 0 = No)	smallint	Valid Values: 0 1
P3: FEHB Plan List	Included in D7 Rx Rebates by Therapeutic Class? (1= Yes; 0 = No)	smallint	Valid Values: 0 1
P3: FEHB Plan List	Included in D8 Rx Rebates for the Top 25 Drugs? (1= Yes; 0 = No)	smallint	Valid Values: 0 1

## 2.2 Data Files

### D1 Premium and Life Years

Each row in D1 must have a unique combination of EIN, state, and market segment.

Template Name	Column Name	Data Type	Instructions
D1: Premium and Life Years	Company Name	varchar(256)	Enter the name of the issuer, TPA, FEHB carrier, plan sponsor, or other reporting entity, as applicable. <b>Do not enter more than one value.</b>
D1: Premium and Life Years	Company EIN	varchar(9)	Enter the 9-digit EIN. Include leading zeros if your EIN has fewer than 9 digits. Do not use dashes. Ex: 001234567. <b>Do not enter more than one value.</b>
D1: Premium and Life Years	Aggregation State	char(2)	Enter the 2-character state or territory postal code. Ex: NY. <b>Do not enter more than one value.</b>
D1: Premium and Life Years	Market Segment	varchar(100)	<u>Valid Values:</u> Individual market Student market Small group market Large group market SF small employer plans SF large employer plans FEHB plans <b>Do not enter more than one value.</b>

Template Name	Column Name	Data Type	Instructions
D1: Premium and Life Years	Average Monthly Premium Paid by Members	numeric(24,8)	
D1: Premium and Life Years	Average Monthly Premium Paid by Employers	numeric(24,8)	
D1: Premium and Life Years	Life Years	numeric(24,8)	
D1: Premium and Life Years	Earned Premium	numeric(24,8)	For fully-insured plans.
D1: Premium and Life Years	Premium Equivalents	numeric(24,8)	For self-funded plans.
D1: Premium and Life Years	Admin Fees Paid (included in the Premium Equivalents field)	numeric(24,8)	For self-funded plans.
D1: Premium and Life Years	Stop Loss Premium Paid (included in the Premium Equivalents field)	numeric(24,8)	For self-funded plans.

## D2 Spending by Category

Each row in D2 must have a unique combination of EIN, state, market segment, and spending category.

Template Name	Column Name	Data Type	Instructions
D2: Spending by Category	Company Name	varchar(256)	Enter the name of the issuer, TPA, FEHB carrier, plan sponsor, or other reporting entity, as applicable. <b>Do not enter more than one value.</b>
D2: Spending by Category	Company EIN	varchar(9)	Enter the 9-digit EIN. Include leading zeros if your EIN has fewer than 9 digits. Do not use dashes. Ex: 001234567. <b>Do not enter more than one value.</b>
D2: Spending by Category	Aggregation State	char(2)	Enter the 2-character state postal code. Ex: NY. <b>Do not enter more than one value.</b>
D2: Spending by Category	Market Segment	varchar(100)	<u>Valid Values:</u> Individual market Student market Small group market Large group market SF small employer plans SF large employer plans FEHB plans <b>Do not enter more than one value.</b>
D2: Spending by Category	Spending Category	Varchar(256)	<u>Valid Values:</u> Hospital Primary Care

Template Name	Column Name	Data Type	Instructions
			Specialty Care Other Medical Costs and Services Known medical benefit drugs Estimated medical benefit drugs <b>Do not enter more than one value.</b>
D2: Spending by Category	Total Spending	numeric(24,8)	
D2: Spending by Category	Total Cost Sharing	numeric(24,8)	
D2: Spending by Category	Amounts Not Applied to Deductible and/or Out-of-Pocket Maximum	numeric(24,8)	

### D3 Top 50 Most Frequent Brand Drugs

Each row in D3 must have a unique combination of EIN, state, market segment, and drug code.

Template Name	Column Name	Data Type	Instructions
D3: Top 50 Most Frequent Brand Drugs	Company Name	varchar(256)	Enter the name of the issuer, TPA, FEHB carrier, plan sponsor, or other reporting entity as applicable. <b>Do not enter more than one value.</b>
D3: Top 50 Most Frequent Brand Drugs	Company EIN	varchar(9)	Enter the 9-digit EIN. Include leading zeros if your EIN has fewer than 9 digits. Do not use dashes. Ex: 001234567. <b>Do not enter more than one value.</b>
D3: Top 50 Most Frequent Brand Drugs	Aggregation State	char(2)	Enter the 2-character state postal code. Ex: NY. <b>Do not enter more than one value.</b>
D3: Top 50 Most Frequent Brand Drugs	Market Segment	varchar(100)	<u>Valid Values:</u> Individual market Student market Small group market Large group market SF small employer plans SF large employer plans FEHB plans <b>Do not enter more than one value.</b>
D3: Top 50 Most Frequent Brand Drugs	Drug Name	varchar(2048)	Enter the drug name from the CMS crosswalk file. <b>Do not enter more than one value.</b>
D3: Top 50 Most Frequent Brand Drugs	Drug Code	varchar(100)	Enter the drug code from the CMS crosswalk file. Do not use NDC. <b>Do not enter more than one value.</b>

Template Name	Column Name	Data Type	Instructions
D3: Top 50 Most Frequent Brand Drugs	Frequency Rank	tinyint	<u>Valid Values:</u> 1-50. <b>Do not enter more than one value.</b>
D3: Top 50 Most Frequent Brand Drugs	Number of Paid Claims	numeric(24,8)	
D3: Top 50 Most Frequent Brand Drugs	Number of Members with a Paid Claim	int	
D3: Top 50 Most Frequent Brand Drugs	Number of Dosage Units	numeric (24,8)	
D3: Top 50 Most Frequent Brand Drugs	Total Spending	numeric(24,8)	
D3: Top 50 Most Frequent Brand Drugs	Total Cost Sharing	numeric(24,8)	
D3: Top 50 Most Frequent Brand Drugs	Manufacturer Cost Sharing Assistance	numeric(24,8)	

#### D4 Top 50 Most Costly Drugs

Each row in D4 must have a unique combination of EIN, state, market segment, and drug code.

Template Name	Column Name	Data Type	Instructions
D4: Top 50 Most Costly Drugs	Company Name	varchar(256)	Enter the name of the issuer, TPA, FEHB carrier, plan sponsor, or other reporting entity as applicable. <b>Do not enter more than one value.</b>
D4: Top 50 Most Costly Drugs	Company EIN	varchar(9)	Enter the 9-digit EIN. Include leading zeros if your EIN has fewer than 9 digits. Do not use dashes. Ex: 001234567. <b>Do not enter more than one value.</b>
D4: Top 50 Most Costly Drugs	Aggregation State	char(2)	Enter the 2-character state postal code. Ex: NY. <b>Do not enter more than one value.</b>
D4: Top 50 Most Costly Drugs	Market Segment	varchar(256)	<u>Valid Values:</u> Individual market Student market Small group market Large group market SF small employer plans SF large employer plans FEHB plans <b>Do not enter more than one value.</b>

Template Name	Column Name	Data Type	Instructions
D4: Top 50 Most Costly Drugs	Drug Name	varchar(2048)	Enter the drug name from the CMS crosswalk file. <b>Do not enter more than one value.</b>
D4: Top 50 Most Costly Drugs	Drug Code	varchar(100)	Enter the drug code from the CMS crosswalk file. Do not use NDC. <b>Do not enter more than one value.</b>
D4: Top 50 Most Costly Drugs	Cost Rank	tinyint	<u>Valid Values:</u> 1-50. <b>Do not enter more than one value.</b>
D4: Top 50 Most Costly Drugs	Number of Paid Claims	numeric(24,8)	
D4: Top 50 Most Costly Drugs	Number of Members with a Paid Claim	int	
D4: Top 50 Most Costly Drugs	Number of Dosage Units	numeric(24,8)	
D4: Top 50 Most Costly Drugs	Total Spending	numeric(24,8)	
D4: Top 50 Most Costly Drugs	Total Cost Sharing	numeric(24,8)	
D4: Top 50 Most Costly Drugs	Manufacturer Cost Sharing Assistance	numeric(24,8)	

#### D5 Top 50 Drugs by Spending Increase

Each row in D5 must have a unique combination of EIN, state, market segment, and drug code.

Template Name	Column Name	Data Type	Instructions
D5: Top 50 Drugs by Spending Increase	Company Name	varchar(256)	Enter the name of the issuer, TPA, FEHB carrier, plan sponsor, or other reporting entity, as applicable. <b>Do not enter more than one value.</b>
D5: Top 50 Drugs by Spending Increase	Company EIN	varchar(9)	Enter the 9-digit EIN. Include leading zeros if your EIN has fewer than 9 digits. Do not use dashes. Ex: 001234567. <b>Do not enter more than one value.</b>
D5: Top 50 Drugs by Spending Increase	Aggregation State	char(2)	Enter the 2-character state postal code. Ex: NY. <b>Do not enter more than one value.</b>
D5: Top 50 Drugs by Spending Increase	Market Segment	varchar(100)	<u>Valid Values:</u> Individual market Student market Small group market Large group market SF small employer plans SF large employer plans FEHB plans <b>Do not enter more than one value.</b>

Template Name	Column Name	Data Type	Instructions
D5: Top 50 Drugs by Spending Increase	Drug Name	varchar(2048)	Enter the drug name from the CMS crosswalk file. <b>Do not enter more than one value.</b>
D5: Top 50 Drugs by Spending Increase	Drug Code	varchar(100)	Enter the drug code from the CMS crosswalk file. Do not use NDC. <b>Do not enter more than one value.</b>
D5: Top 50 Drugs by Spending Increase	Spending Increase Rank	tinyint	<u>Valid Values:</u> 1-50. <b>Do not enter more than one value.</b>
D5: Top 50 Drugs by Spending Increase	Number of Paid Claims	numeric(24,8)	
D5: Top 50 Drugs by Spending Increase	Number of Members with a Paid Claim	int	
D5: Top 50 Drugs by Spending Increase	Number of Dosage Units	numeric(24,8)	
D5: Top 50 Drugs by Spending Increase	Total Spending	numeric(24,8)	
D5: Top 50 Drugs by Spending Increase	Total Cost Sharing	numeric(24,8)	
D5: Top 50 Drugs by Spending Increase	Manufacturer Cost Sharing Assistance	numeric(24,8)	
D5: Top 50 Drugs by Spending Increase	Prior Year Number of Paid Claims	numeric(24,8)	
D5: Top 50 Drugs by Spending Increase	Prior Year Number of Members with a Paid Claim	int	
D5: Top 50 Drugs by Spending Increase	Prior Year Number of Dosage Units	numeric(24,8)	
D5: Top 50 Drugs by Spending Increase	Prior Year Total Spending	numeric(24,8)	
D5: Top 50 Drugs by Spending Increase	Prior Year Total Cost Sharing	numeric(24,8)	
D5: Top 50 Drugs by Spending Increase	Prior Year Manufacturer Cost Sharing Assistance	numeric(24,8)	
D5: Top 50 Drugs by Spending Increase	Dollar Increase in Total Spending	numeric(24,8)	

## D6 Rx Totals

Each row in D6 must have a unique combination of EIN, state, and market segment.

Template Name	Column Name	Data Type	Instructions
D6: Rx Totals	Company Name	varchar(256)	Enter the name of the issuer, TPA, FEHB carrier, plan sponsor, or other reporting entity, as applicable. <b>Do not enter more than one value.</b>
D6: Rx Totals	Company EIN	varchar(9)	Enter the 9-digit EIN. Include leading zeros if your EIN has fewer than 9 digits. Do not use dashes. Ex: 001234567. <b>Do not enter more than one value.</b>
D6: Rx Totals	Aggregation State	char(2)	Enter the 2-character state postal code. Ex: NY. <b>Do not enter more than one value.</b>
D6: Rx Totals	Market Segment	varchar(100)	<u>Valid Values:</u> Individual market Student market Small group market Large group market SF small employer plans SF large employer plans FEHB plans <b>Do not enter more than one value.</b>
D6: Rx Totals	Total Rx Spending under Pharmacy Benefit	numeric(24,8)	
D6: Rx Totals	Rx Amounts Not Applied to Deductible and/or Out-of-Pocket Maximum	numeric(24,8)	
D6: Rx Totals	Bona Fide Service Fees	numeric(24,8)	
D6: Rx Totals	PBM Spread Amounts	numeric(24,8)	
D6: Rx Totals	Total Rebates/Fees/Other Remuneration	numeric(24,8)	
D6: Rx Totals	Restated Prior Year Rebates/Fees/Other Remuneration	numeric(24,8)	

## D7 Rx Rebates by Therapeutic Class

Each row in D7 must have a unique combination of EIN, state, market segment, and therapeutic class code.

Template Name	Column Name	Data Type	Instructions
D7: Rx Rebates by Therapeutic Class	Company Name	varchar(256)	Enter the name of the issuer, TPA, FEHB carrier, plan sponsor, or other reporting entity, as applicable. <b>Do not enter more than one value.</b>
D7: Rx Rebates by Therapeutic Class	Company EIN	varchar(9)	Enter the 9-digit EIN. Include leading zeros if your EIN has fewer than 9 digits. Do not use dashes. Ex: 001234567. <b>Do not enter more than one value.</b>
D7: Rx Rebates by Therapeutic Class	Aggregation State	char(2)	Enter the 2-character state postal code. Ex: NY. <b>Do not enter more than one value.</b>
D7: Rx Rebates by Therapeutic Class	Market Segment	varchar(100)	<u>Valid Values:</u> Individual market Student market Small group market Large group market SF small employer plans SF large employer plans FEHB plans <b>Do not enter more than one value.</b>
D7: Rx Rebates by Therapeutic Class	Therapeutic Class Name	varchar(2048)	Enter the therapeutic class name from the CMS crosswalk file. <b>Do not enter more than one value.</b>
D7: Rx Rebates by Therapeutic Class	Therapeutic Class Code	varchar(100)	Enter the therapeutic class code from the CMS crosswalk file. <b>Do not enter more than one value.</b>
D7: Rx Rebates by Therapeutic Class	Number of Paid Claims	numeric(24,8)	
D7: Rx Rebates by Therapeutic Class	Number of Members with a Paid Claim	int	
D7: Rx Rebates by Therapeutic Class	Number of Dosage Units	numeric(24,8)	
D7: Rx Rebates by Therapeutic Class	Total Spending	numeric(24,8)	
D7: Rx Rebates by Therapeutic Class	Total Cost Sharing	numeric(24,8)	
D7: Rx Rebates by Therapeutic Class	Manufacturer Cost Sharing Assistance	numeric(24,8)	
D7: Rx Rebates by Therapeutic Class	Rebates Retained by PBM	numeric(24,8)	

Template Name	Column Name	Data Type	Instructions
D7: Rx Rebates by Therapeutic Class	Rebates Retained by Plan/Issuer/Carrier	numeric(24,8)	
D7: Rx Rebates by Therapeutic Class	Rebates Passed to Member at POS	numeric(24,8)	
D7: Rx Rebates by Therapeutic Class	Net Transfer of Fees and Other Remuneration from Manufacturer to Plan/Issuer/Carrier	numeric(24,8)	
D7: Rx Rebates by Therapeutic Class	Net Transfer of Fees and Other Remuneration from Pharmacy to Plan/Issuer/Carrier	numeric(24,8)	
D7: Rx Rebates by Therapeutic Class	Total Rebates/Fees/Other Remuneration	numeric(24,8)	
D7: Rx Rebates by Therapeutic Class	Restated Prior Year Rebates/Fees/Other Remuneration	numeric(24,8)	

#### D8 Rx Rebates for the Top 25 Drugs

Each row in D8 must have a unique combination of EIN, state, market segment, and drug code.

Template Name	Column Name	Data Type	Instructions
D8: Rx Rebates for the Top 25 Drugs	Company Name	varchar(256)	Enter the name of the issuer, TPA, FEHB carrier, plan sponsor, or other reporting entity, as applicable. <b>Do not enter more than one value.</b>
D8: Rx Rebates for the Top 25 Drugs	Company EIN	varchar(9)	Enter the 9-digit EIN. Include leading zeros if your EIN has fewer than 9 digits. Do not use dashes. Ex: 001234567. <b>Do not enter more than one value.</b>
D8: Rx Rebates for the Top 25 Drugs	Aggregation State	char(2)	Enter the 2-character state postal code. Ex: NY. <b>Do not enter more than one value.</b>
D8: Rx Rebates for the Top 25 Drugs	Market Segment	varchar(100)	<u>Valid Values:</u> Individual market Student market Small group market Large group market SF small employer plans SF large employer plans FEHB plans <b>Do not enter more than one value.</b>

Template Name	Column Name	Data Type	Instructions
D8: Rx Rebates for the Top 25 Drugs	Drug Name	varchar(2048)	Enter the drug name from the CMS crosswalk file. <b>Do not enter more than one value.</b>
D8: Rx Rebates for the Top 25 Drugs	Drug Code	varchar(100)	Enter the drug code from the CMS crosswalk file. Do not use NDC. <b>Do not enter more than one value.</b>
D8: Rx Rebates for the Top 25 Drugs	Rebate Rank	tinyint	<u>Valid Values:</u> 1-25. <b>Do not enter more than one value.</b>
D8: Rx Rebates for the Top 25 Drugs	Number of Paid Claims	numeric(24,8)	
D8: Rx Rebates for the Top 25 Drugs	Number of Members with a Paid Claim	int	
D8: Rx Rebates for the Top 25 Drugs	Number of Dosage Units	numeric(24,8)	
D8: Rx Rebates for the Top 25 Drugs	Total Spending	numeric(24,8)	
D8: Rx Rebates for the Top 25 Drugs	Total Cost Sharing	numeric(24,8)	
D8: Rx Rebates for the Top 25 Drugs	Manufacturer Cost Sharing Assistance	numeric(24,8)	
D8: Rx Rebates for the Top 25 Drugs	Rebates Retained by PBM	numeric(24,8)	
D8: Rx Rebates for the Top 25 Drugs	Rebates Retained by Plan/Issuer/Carrier	numeric(24,8)	
D8: Rx Rebates for the Top 25 Drugs	Rebates Passed to Member at POS	numeric(24,8)	
D8: Rx Rebates for the Top 25 Drugs	Net Transfer of Fees and Other Remuneration from Manufacturer to Plan/Issuer/Carrier	numeric(24,8)	
D8: Rx Rebates for the Top 25 Drugs	Net Transfer of Fees and Other Remuneration from Pharmacy to Plan/Issuer/Carrier	numeric(24,8)	
D8: Rx Rebates for the Top 25 Drugs	Total Rebates/Fees/Other Remuneration	numeric(24,8)	
D8: Rx Rebates for the Top 25 Drugs	Restated Prior Year Rebates/Fees/Other Remuneration	numeric(24,8)	

### 3. File Requirements

Follow these instructions when preparing your submission:

- Your files must be in Comma Separated Value (CSV) format.
- The order of the columns in your file must exactly match the order of the columns in the data dictionary.
- The first row of your file should contain the column names. Your data should start on the second row.
- You can use letters, numbers, and the following special characters in non-numeric fields: - ( ) { } [ ] & ~ ! ; @ # \$ % + = |.
- Do not use commas or dollar signs in numeric fields. Only numbers and decimals are allowed.
- Do not use slashes (“/”) in alphanumeric fields. HIOS won’t accept text with slashes because data with slashes requires additional security screening that would slow down processing time. The exception is that you can use slashes in the column headers and in date fields.
- You can use commas in a text field if there are quotation marks on both sides of the text. Ex: “Company ABC, Inc.”
- Excel will automatically insert the quotation marks for you when you save a file in CSV format. For example, you can enter Company ABC, Inc in the template without quotation marks and Excel will convert it to “Company ABD, Inc” when you save it as a CSV file. Without the quotation marks, HIOS won’t know whether a comma is part of a text string or is a delimiter between columns.
- Do not use more than 8 decimal places in numeric fields. Ex: 0.6666666666 should be rounded to 0.66666667.

You can generate your own CSV files using the Data Dictionary or you can create them using the RxDC templates provided by CMS. If you use the Excel templates provided by CMS, remember to save your files in CSV format before uploading them into the Health Insurance Oversight System (HIOS). Note: the colors in the RxDC templates make the template easier to read. They do not convey meaning.

### 4. Version History

The table below documents changes to the data dictionary and templates. Note: Prior versions of the data dictionary and templates are archived in the Registration for Technical Assistance Portal (REGTAP) library. To access them, log in to REGTAP at <https://regtap.cms.gov/> and click on the “Library” link

at the top of the page. The most recent versions of the documents are in REGTAP and on the CMS website at <https://www.cms.gov/CCIIO/Programs-and-Initiatives/Other-Insurance-Protections/Prescription-Drug-Data-Collection>.

Date	Change
11/23/2021	Initial publication of the reporting form instructions and templates.
06/28/2022	<ul style="list-style-type: none"> <li>• Added the Data Type column to the data dictionary</li> <li>• P1, P2, and P3:               <ul style="list-style-type: none"> <li>– Inserted the word “year” for the beginning and end date columns “Plan Year Beginning Date” “Plan Year End Date”.</li> <li>– Inserted the phrase “of the reference year” for the members as of 12/31 column: “Members as of 12/31 of the reference year”.</li> <li>– Added 8 new fields for reporting entities to indicate which plans are included in the data files.</li> </ul> </li> <li>• D1: Changed the column name from “Average Monthly Premium Paid by Employees” to “Average Monthly Premium Paid by Members”</li> <li>• D2: Changed the Spending Category valid values</li> <li>• D6: Changed “Total Rx Spending under Non-Pharmacy Benefits” to “Rx Amounts Not Applied to Deductible and/or Out-of-Pocket Maximum”.</li> </ul>
03/20/2023	<ul style="list-style-type: none"> <li>• Replaced the column for HIOS Plan ID in plan list P2 with a column to collect information about benefit carve-outs.</li> <li>• Renamed columns A and B in the data files (D1 – D8) from “Issuer or TPA Name” and “Issuer or TPA EIN” to “Company Name” and “Company EIN” to reflect the fact that you may choose to aggregate data at the plan sponsor, carrier, reporting entity, or other company level, rather than only the issuer or TPA level. The purpose of these columns has not changed, only the names.</li> <li>• Renamed column C in the data files (D1 – D8) from “State” to “Aggregation State” to more clearly differentiate from the column labeled “States in which the plan is offered” in plan lists P2 and P3. The purpose of this column has not changed.</li> <li>• Renamed column J in D1 from “ASO/TPA Fees Paid” to “Admin Fees Paid” to reflect that self-funded plans pay administrative fees to other types of companies, such as PBMs. The purpose of the column has not changed.</li> </ul>

## 5. Additional Resources

The RxDC Reporting Instructions and the RxDC HIOS User Manual are available on the CMS website at <https://www.cms.gov/CCIIO/Programs-and-Initiatives/Other-Insurance-Protections/Prescription-Drug-Data-Collection>. Additional training materials are available in REGTAP at <https://regtap.cms.gov/rxdc.php>.

**Help Desk**

If you have questions about filling out your template or submitting your data, contact the HIOS Help Desk at [CMS\\_FEPS@cms.hhs.gov](mailto:CMS_FEPS@cms.hhs.gov). You can typically expect a response within the same day and a full resolution within 1-2 weeks. During periods of high volume, response times may be significantly longer.

For faster service:

- Include “RxDC HIOS Question” in the body of the email for technical questions about creating CSV files, error messages, or using the HIOS module
- Include “RxDC Policy Question” in the body of the email for non-technical questions