

System Requirements Specification Centers for Medicare & Medicaid Services

 ${\bf Medicare.gov/Hospital Compare\ Downloadable\ Databases}$

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Document Purpose

The purpose of this document is to identify the requirements for maintenance and support of the Hospital Compare Downloadable Databases, which can be found by clicking the following links: http://www.medicare.gov/download/downloaddb.asp and https://data.medicare.gov. The data is displayed on the Hospital Compare Web site and can include additional information about hospital performance that may not be publicly reported on the Web site.

Background

Hospital Compare was created as a result of the Hopsital Quality Initiative through the efforts of the Centers for Medicare and Medicaid Services (CMS) and the Hospital Quality Alliance (HQA). The HQA was a public-private collaboration established in December 2002 to promote data collection and public reporting on hospital quality of care. The HQA consisted of organizations that represented consumers, payers, hospitals, clinicians, accrediting organizations, federal agencies, and other stakeholders. The HQA effort was intended to help consumers make informed health care decisions and to support efforts to improve quality in U.S. hospitals. The HQA disbanded in December 2011, and CMS currently maintains the Hospital Compare Web site.

Hospital Compare is a tool that provides valid, credible, and user-friendly information about the quality of care delivered in the nation's acute care, critical access, VA, and Children's hospitals. This information can help consumers make informed decisions about health care. Hospital Compare allows consumers to select multiple hospitals and directly compare performance measure information related to acute myocardial infarction (AMI), heart failure (HF), pneumonia (PN), surgery, and other conditions. See <u>Appendix A</u> for a full list of the Hospital Compare measures. These results are organized by:

- Patient Survey Results
- Timely and Effective Care (Process of Care) measures
- Readmissions, Complications, and Deaths
- Use of Medical Imaging
- Medicare Payment
- Number of Medicare Patients Treated
- Linking Quality to Payment
 - Hospital Readmissions Reduction
 - Hospital Value-Based Purchasing

To access the Hospital Compare Web site, please visit www.medicare.gov/hospitalcompare.

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Hospital Compare Measures Description/Background and Reporting Cycles

Data is collected in differing timeframes from the various quality measurement contractors. Below is a brief description of the collection process and report timing for each measure set.

Name	Structural Measures
Description/	A Structural measure reflects the environment in which providers care for patients. For example, whether
Background	or not a hospital uses an electronic health record is a Structural measure. Hospitals submit Structural
	measure data using an online data entry tool made available to hospitals and their vendors.
Reporting	The collection period for the Structural measures is 12 months. The Structural measures are typically
Cycle	refreshed annually.

Name	Timely and Effective Care
Description/	The measures of Timely and Effective Care measure the percentage of hospital patients who receive
Background	treatments known to get the best results for certain common, serious medical conditions or surgical
	procedures, and how quickly hospitals treat patients who come to the hospital with certain medical
	emergencies. The measures only apply to patients for whom the recommended treatment would be
	appropriate. The measures of Timely and Effective Care apply to adults and children treated at hospitals
	paid under the Inpatient Prospective Payment System (IPPS) or the Outpatient Prospective Payment
	System (OPPS) or those that voluntarily report data on measures for whom the recommended treatments
	would be appropriate, including Medicare patients, Medicare managed care patients, and non-Medicare
	patients.
Reporting	The collection period for the Timely and Effective Care measures is generally 12 months. The Timely
Cycle	and Effective Care measures are typically refreshed quarterly, based on a rolling four quarters.

Name	30-Day Mortality and Readmission Measures
Description/	The risk-standardized AMI, HF, and PN 30-Day Mortality and Readmission measures were developed by
Background	a team of clinical and statistical experts from Yale and Harvard universities, using a methodology that has
	been published in peer reviewed literature. The measures comply with standards for publicly reported
	outcomes models set forth by the American Heart Association and the American College of Cardiology.
	CMS calculates hospital-specific 30-day mortality and readmission rates using Medicare claims and
	eligibility information as well as VA administrative information. Using administrative data makes it
	possible to calculate mortality and readmission rates without performing medical chart reviews or
	requiring hospitals to report additional information to CMS. To make comparisons between hospitals fair,
	calculation of the 30-Day Mortality and Readmission measures adjust for patient characteristics that may
	make death or readmission more likely, even if the hospital provided quality care—including the patient's
	age, gender, past medical history, and other diseases or conditions (comorbidities) the patient had at
	hospital arrival that are known to increase the patient's risk of dying or readmission.
Reporting	The collection period for the 30-Day Mortality and Readmission measures is 36 months. The 30-Day
Cycle	Mortality and Readmission measures for AMI, HF, and PN are produced from Medicare claims and
	enrollment data. The 30-Day Mortality and Readmission measures are typically refreshed annually.

Name	AHRQ Patient Safety Indicators (PSIs) and Inpatient Quality Indicators (IQIs)
Description/	The AHRQ PSIs and IQIs reflect quality of care for hospitalized adults and focus on potentially avoidable
Background	complications and iatrogenic events. CMS currently publicly reports six PSI measures and three IQI
	measures.
Reporting	The collection period for the PSIs and IQIs is 24 months. The PSI and IQI measures are typically
Cycle	refreshed annually.

Name	Hospital-Acquired Conditions (HACs)

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Description/	On July 31, 2008, in the IPPS Fiscal Year (FY) 2009 Final Rule, CMS selected 10 categories of
Background	conditions for a HAC payment provision. Hospitals no longer receive additional payment for cases in
	which one of the selected conditions was not present on admission. CMS will use eight of these 10 HACs
	for the Hospital Inpatient Quality Reporting (IQR) Program. Only hospitals participating in the IQR
	Program and paid under the IPPS will have results for the HAC measures on Hospital Compare because
	the HAC measures rely on Present on Admission (POA) coding, which is only required of IPPS hospitals.
Reporting	The collection period for the HAC measures is 24 months. The HAC measures are typically refreshed
Cycle	annually.

Name	Healthcare-Associated Infections (HAIs)
Description/	HAIs are among the leading causes of death in the United States. HAIs put the patient at risk for serious
Background	injury, morbidity, mortality, increase the days of hospitalization required for patients, and add to
	healthcare costs. HAIs are largely preventable using widely publicized guidelines and interventions, such
	as better hygiene and advanced scientifically tested techniques. HAI measure data are collected by the
	Centers for Disease Control and Prevention (CDC) via the National Healthcare Safety Network (NHSN)
	tool. Hospitals must enroll and complete NHSN training to comply with CMS' IQR Program HAI
	requirements.
Reporting	The collection period for the HAI measures is 12 months. The HAI measures are typically refreshed
Cycle	quarterly, based on a rolling four quarters.

Name	Outpatient Imaging Efficiency
Description/	CMS has adopted six measures (OP-8 through OP-11, OP-13, and OP-14) which capture the quality of
Background	outpatient care in the area of imaging. CMS notes that the purpose of these measures is to promote high-
	quality efficient care. Each of the measures currently utilize both the Hospital OPPS claims and Physician
	Part B claims in the calculations. These calculations are based on the administrative claims of the
	Medicare fee-for-service population and no additional data submission is required by hospitals.
Reporting	The collection period for the Outpatient Imaging Efficiency measures is 12 months. The Outpatient
Cycle	Imaging Efficiency measures are typically refreshed annually.

Name	Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Patient Survey
Description/	The HCAHPS Patient Survey is a 32-item survey instrument and data collection methodology for
Background	measuring patients' perceptions of their hospital experience. The survey is administered to a random
	sample of adult inpatients between 48 hours and six weeks after discharge. Six summary measures, two
	individual items, and two global items are publicly reported on the Hospital Compare Web site for each
	participating hospital. The six composites summarize how well nurses and doctors communicate with
	patients, how responsive hospital staff are to patients' needs, how well hospital staff help patients manage
	pain, how well the staff communicates with patients about medicines, and whether key information is
	provided at discharge. The two individual items address the cleanliness and quietness of patients' rooms,
	while the two global items report patients' overall rating of the hospital, and whether they would
	recommend the hospital to family and friends. The new Care Transitions composite will be publicly
	reported in late 2014. See Appendix B for a full list of HCAHPS Survey items and response options
	questions. More information about the HCAHPS Survey can be found in the official HCAHPS Online
	Web site, <u>www.HCAHPSonline.org</u> .
Reporting	The collection period for the HCAHPS measures is 12 months. The HCAHPS measures are typically
Cycle	refreshed quarterly.

Name	Number of Medicare Patients and Medicare Payment
Description/	The payment and volume information reflects inpatient hospital services provided by hospitals to
Background	Medicare beneficiaries. CMS has posted this information for the public to view the cost to the Medicare

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	program of treating beneficiaries with certain illnesses in their community and the number of Medicare patients treated. Payment and volume information can provide users with a general overview of hospitals' experience with Medicare Severity Diagnosis Related Groups (MS-DRGs). MS-DRGs are payment groups of patients who have similar clinical characteristics and similar costs. The median payment refers to the midpoint of all payments to the hospital for a particular MS-DRG, that is, half the payments were lower and half the payments were higher than the median payment.
Reporting	The collection period for the Number of Medicare Patients and Medicare Payment measures is 12
Cycle	months. The Number of Medicare Patients and Medicare Payment measures are typically refreshed
	annually.

Name	Hospital Readmissions Reduction Program		
Description/	In October 2012, CMS began reducing Medicare payments for IPPS hospitals with excess readmissions.		
Background	Excess readmissions are measured using a ratio, by dividing a hospital's number of "predicted" 30-day		
	readmissions for AMI, HF, and PN by the number that would be "expected," based on an average		
	d with similar patients. A ratio greater than one indicates excess readmissions. The calculations		
	include only acute care hospitals paid under IPPS and Maryland hospitals.		
Reporting	The collection period for the Hospital Readmissions Reduction Program is 36 months. The Hospital		
Cycle	Readmissions Reduction Program measures are typically refreshed annually.		

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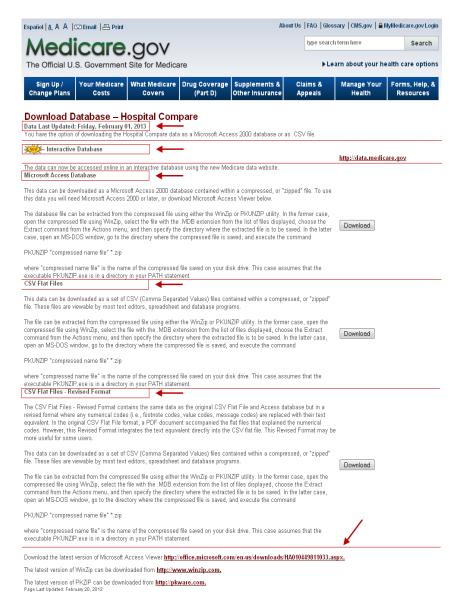
Name	Hospital Value-Based Purchasing (HVBP)
Description/	The HVBP program is part of CMS' long-standing effort to link Medicare's payment system to quality.
Background	The program implements value-based purchasing to the payment system that accounts for the largest
	share of Medicare spending, affecting payment for inpatient stays in over 3,500 hospitals across the
	country. Hospitals are paid for inpatient acute care services based on the quality of care, not just quantity
	of the services they provide. For the first FY of the HVBP Program, two domains will be used to assess
	hospital performance: 1) Patient Experience of Care and 2) Clinical Process of Care. The Patient
	Experience of Care domain is comprised of the HCAHPS Survey measures. The Clinical Process of Care
	domain is comprised of selected IQR Program's Process of Care measures from the AMI, HAI, HF, PN,
	and Surgical Care Improvement Project (SCIP) measure sets. A performance score and an improvement
	score are calculated for each measure, a domain score is then calculated for each of the two domains. The
	Total Performance Score (TPS) is calculated using the weighted domain scores. For FY 2013 the Clinical
	Process of Care domain score is weighted as 70 percent of the TPS, and the Patient Experience of Care
	domain is weighted as 30 percent of the TPS.
Reporting	The collection period for HVBP measures is 12 months. The HVBP measures are typically refreshed
Cycle	annually.

Data Collection Period Information

The Downloadable Databases are refreshed within 24 hours of the Hospital Compare data update as indicated in the bottom left corner of the Hospital Compare home page. For more information, there is a file that provides the measurement dates for each of the measure types being reported in that file. A sample of the measurement date file is shown below:

Measure	Measure	Measure	Measure	Measure
Code	Start Quarter	Start Date	End Quarter	End Date
AMI-10	2Q2011	4/1/2011	1Q2012	3/31/2012
AMI-2	2Q2011	4/1/2011	1Q2012	3/31/2012
AMI-7a	2Q2011	4/1/2011	1Q2012	3/31/2012
AMI-8a	2Q2011	4/1/2011	1Q2012	3/31/2012
CAC-1	2Q2011	4/1/2011	1Q2012	3/31/2012
CAC-2	2Q2011	4/1/2011	1Q2012	3/31/2012
CAC-3	2Q2011	4/1/2011	1Q2012	3/31/2012
Composite 6				
(Q19 & Q20)	2Q2011	4/1/2011	1Q2012	3/31/2012
ED-1b	1Q2012	1/1/2012	1Q2012	3/31/2012
ED-2b	1Q2012	1/1/2012	1Q2012	3/31/2012
HAC-1	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-2	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-3	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-4	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-5	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-6	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-7	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-8	3Q2009	7/4/444	20201	6/30/2011
Colored Inc.		9 1/ 2011	TUZU12	3/31/2012
SCIP-VTE-2	2Q2011	4/1/2011	1Q2012	3/31/2012

Hospital Compare Downloadable Database



The Downloadable Database Interface page has six sections:

- **Header** In the header of the screen you will see the name of the Downloadable Database you have selected and the last date that database was updated in the database repository. This date should be the same as the date shown in the "Additional Information" section of the Hospital Compare home page.
- There are four formats of the Hospital Compare data available from the Downloadable Database interface. Each database is a zip file containing multiple files.
 - 1. **Interactive** You can go to Data.Medicare.gov and view the data within your browser.
 - 2. **Microsoft Access Database** Allows you to download a single database that has multiple tables containing various datasets.

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- 3. **CSV Flat File** Allows you to download a series of CSV files that have the same names and data as is stored in the Access database.
- 4. **CSV Flat File Revised Format** Allows you to download a series of CSV files that have the same data as the other two formats but is translated to plain English rather than technical attributes. Data are also grouped differently to meet the needs of differing user groups. The data in the Revised CSV files are the same as the data available from Data.Medicare.gov.
- The **footer** section of the Downloadable Data Interface provides links to download the following complementary applications:
 - Microsoft Access Viewer, which allows users that do not have Microsoft Access installed on their workstation to interact with the Access database data.
 - Winzip and PKUnzip, which allow the users to unzip the zipped files that contain the downloadable data.

Access and CSV Downloadable File Contents

When looking at the Access table names and CSV file names, the following acronyms tell the type of data reported in a given table.

Acronym	Meaning
FTNT	Footnote
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems
IMG	Imaging
IMM	Immunizations
MSR	Measure
READM	Readmissions
MPV	Medicare Payments and Volume
SPP	Spending per Patient

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Access and CSV Data File Summary
The table below shows the titles of the Access table names and CSV file names.

Hospital.zip Hospital.pdf Readme.txt Readme.txt Access Table Names dbo_vwHQI_HOSP vwMeasure_Dates dbo_vwHQI_FTNT Hospital.zip If	CSV file Name: Hospital_flatfiles.zip Hospital_flatfiles.pdf Readme.txt CSV Data File Names (.csv) HQI_HOSP HQI_HOSP_MSR_DT HQI_FTNT HQI_HOSP_AHRQ
Hospital.pdf Readme.txt Readme.txt Access Table Names dbo_vwHQI_HOSP vwMeasure_Dates dbo_vwHQI_FTNT H	Hospital_flatfiles.pdf Readme.txt CSV Data File Names (.csv) HQI_HOSP HQI_HOSP_MSR_DT HQI_FTNT
Readme.txt R Access Table Names C dbo_vwHQI_HOSP F vwMeasure_Dates F dbo_vwHQI_FTNT F	Readme.txt CSV Data File Names (.csv) HQI_HOSP HQI_HOSP_MSR_DT HQI_FTNT
dbo_vwHQI_HOSP	HQI_HOSP HQI_HOSP_MSR_DT HQI_FTNT
dbo_vwHQI_HOSPFvwMeasure_DatesFdbo_vwHQI_FTNTF	HQI_HOSP HQI_HOSP_MSR_DT HQI_FTNT
vwMeasure_Dates H dbo_vwHQI_FTNT H	HQI_FTNT
dbo_vwHQI_FTNT H	HQI_FTNT
	HQI HOSP AHRQ
vwHQI_HOSP_AHRQ_STATE	HQI_HOSP_AHRQ_STATE
	HQI_HOSP_AHRQ_NATIONAL
dbo_vwHQI_HOSP_ED H	HQI_HOSP_ED
vwHQI_HOSP_ED_State	HQI_HOSP_ED_State
vwHQI_HOSP_ED_National	HQI_HOSP_ED_US
vwHQI_HOSP_HAC	HQI_HOSP_HAC
vwHQI_HOSP_HAC_NATIONAL H	HQI_HOSP_HAC_NATIONAL
vwHQI_HOSP_HAI H	HQI_HOSP_HAI
vwHQI_HOSP_HAI_STATE	HQI_HOSP_HAI_State
vwHQI_HOSP_HAI_National	HQI_HOSP_HAI_National
dbo_vwHQI_HOSP_HCAHPS_MSR H	HQI_HOSP_HCAHPS_MSR
dbo_vwHQI_STATE_HCAHPS_MSR	HQI_STATE_HCAHPS_MSR
dbo_vwHQI_US_NATIONAL_HCAHPS_MSR	HQI_US_NATIONAL_HCAHPS_MSR
Hvbp_ami_02_07_2013 h	hvbp_ami_02_07_2013
	hvbp_hai_02_07_2013
Hvbp_hcahps_02_07_2013 h	hvbp_hcahps_02_07_2013
Hvbp_hf_02_07_2013 h	hvbp_hf_02_07_2013
Hvbp_pn_02_07_2013 h	hvbp_pn_02_07_2013
Hvbp_scip_02_07_2013 h	hvbp_scip_02_07_2013
Hvbp_tps_02_07_2013 h	hvbp_tps_02_07_2013
dbo_vwHQI_HOSP_IMG_XWLK	HQI_HOSP_IMG_XWLK
dbo_vwHQI_STATE_IMG_AVG	HQI_STATE_IMG_AVG
	HQI_US_NATIONAL_IMG_AVG
	HQI_HOSP_IMM
	HQI_HOSP_IMM_State
<u>`-</u>	HQI_HOSP_IMM_US
	HQI_HOSP_MORTALITY_READM_XWLK
	HQI_STATE_MORTALITY_READM_SCRE
dbo_vwHQI_US_NATIONAL_MORTALITY_READM_R ATE	HQI_US_NATIONAL_MORTALITY_READM_RATE
dbo_vwHQI_HOSP_MPV_MSR	HQI_HOSP_MPV_MSR
dbo_vwHQI_STATE_MPV_MSR	HQI_STATE_MPV_MSR
	HQI_US_NATIONAL_MPV_MSR
	HQI_HOSP_SPP
\	HQI_HOSP_SPP_State
	HQI_HOSP_SPP_National

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MSAccess file name:	CSV file Name:
Hospital.zip	Hospital_flatfiles.zip
Hospital.pdf	Hospital_flatfiles.pdf
Readme.txt	Readme.txt
Access Table Names	CSV Data File Names (.csv)
dbo_vwHQI_HOSP_STRUCTURAL_XWLK	HQI_HOSP_STRUCTURAL_XWLK
vwHQI_READM_REDUCTION	HQI_READM_REDUCTION
dbo_vwHQI_HOSP_MSR_XWLK	HQI_HOSP_MSR_XWLK
dbo_vwHQI_STATE_MSR_AVG	HQI_STATE_MSR_AVG
dbo_vwHQI_US_National_MSR_AVG	HQI_US_National_MSR_AVG
dbo_vwHQI_PCTL_MSR_XWLK	HQI_PCTL_MSR_XWLK

Access and CSV Data Content Summary

Note: Fields having the data type of "memo" do not require a length. They allow the user to input large amounts of text without limit. Fields having the data type of "Text" require the corresponding length provided.

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP	HQI_HOSP	Hospital Characteristics
Description	General information on hospitals	s within the dataset	
Column Name	DDB Data Type		
Provider Number			Memo
Hospital Name			Memo
Address1			Memo
Address2			Memo
Address3			Memo
City			Memo
State			Text(2)
ZIP Code			Text(5)
County Name			Text(25)
Phone Number			Text(10)
Hospital Type			Text(50)
Hospital Ownership	Text(100)		
Emergency Service		·	Text(50)

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Table Name	Physical: Access	Physical: CSV Flat Files	Business	
(<u>Back to Table Listing</u>)	vwMeasure_Dates	HQI_HOSP_MSR_DT	Measure Data Collection	
			Periods	
Description	Current collection dates for avail	lable measures included in the Do	wnloadable Database	
Column Name DDB Data Type				
msr_cd	Memo			
msr_strt_qtr			Memo	
msr_strt_dt			Memo	
msr_end_qtr			Memo	
msr_end_dt	Memo			

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_FTNT	HQI_FTNT	Footnotes
Description Look up table for footnote text in the various data files			
Column Name DI			B Data Type
Footnote			Text (50)
Footnote Text			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business	
(<u>Back to Table Listing</u>)	vwHQI_HOSP_AHRQ	HQI_HOSP_AHRQ	AHRQ PSI and IQI Hospital	
			Results	
Description	AHRQ PSI and IQI measures	s hospital-level results		
Column Name	DDB Data Type			
Prvdr_id			Memo	
PSI_4_SURG_COMP)		Memo	
PSI_4_SURG_COMP	_ F		Memo	
PSI_6_IAT_PTX			Memo	
PSI_6_IAT_PTX_F			Memo	
PSI_11_POSTOP_RE	ESPFAIL		Memo	
PSI_11_POSTOP_RE			Memo	
PSI_12_POSTOP_PU			Memo	
PSI_12_POSTOP_PU	Memo			
PSI_14_POSTOP_DE	Memo			
PSI_14_POSTOP_DE	Memo			
PSI_15_ACC_LAC	Memo			
PSI_15_ACC_LAC_F	Memo			
PSI_90_SAFETY			Memo	
PSI_90_SAFETY_F			Memo	
IQI_11_AAA			Memo	
IQI_11_AAA_F			Memo	
IQI_19_HIP_FX			Memo Memo	
	IQI_19_HIP_FX_F			
IQI_91_CONDS			Memo Memo	
IQI_91_CONDS_F	<u> </u>			
PSI_4_SURG_COMP			Memo	
PSI_4_SURG_COMP			Memo Memo	
	PSI_4_SURG_COMP_LOW_EST			
PSI_4_SURG_COMP	Memo			

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Table Name	Physical: Access	Physical: CSV Flat Files	Business		
(<u>Back to Table Listing</u>)	vwHQI_HOSP_AHRQ	HQI_HOSP_AHRQ	AHRQ PSI and IQI Hospital		
			Results		
Description	AHRQ PSI and IQI measures he	ospital-level results			
Column Name	DDB Data Type				
PSI_6_IAT_PTX_NU	JM_DC		Memo		
PSI_6_IAT_PTX_RA	PSI_6_IAT_PTX_RATE				
PSI_6_IAT_PTX_LO	W_EST		Memo		
PSI_6_IAT_PTX_HIG	GH_EST		Memo		
PSI_11_POSTOP_RE	ESPFAIL_NUM_DC		Memo		
PSI_11_POSTOP_RE	ESPFAIL_RATE		Memo		
PSI_11_POSTOP_RE	ESPFAIL_LOW_EST		Memo		
PSI_11_POSTOP_RE	ESPFAIL_HIGH_EST		Memo		
PSI_12_POSTOP_PU	JLMEMB_DVT_NUM_DC		Memo		
PSI_12_POSTOP_PU	JLMEMB_DVT_RATE		Memo		
PSI_12_POSTOP_PU	JLMEMB_DVT_LOW_EST		Memo		
PSI_12_POSTOP_PU	JLMEMB_DVT_HIGH_EST		Memo		
PSI_14_POSTOP_DE	EHIS_NUM_DC		Memo		
PSI_14_POSTOP_DE	Memo				
PSI_14_POSTOP_DE	EHIS_LOW_EST		Memo		
PSI_14_POSTOP_DE	Memo				
PSI_15_ACC_LAC_N	Memo				
PSI_15_ACC_LAC_I	Memo				
PSI_15_ACC_LAC_I	Memo				
PSI_15_ACC_LAC_I	HIGH_EST		Memo		
PSI_90_SAFETY_NU	Memo				
PSI_90_SAFETY_RA	ATE		Memo		
PSI_90_SAFETY_LC	OW_EST		Memo		
PSI_90_SAFETY_HI	GH_EST		Memo		
IQI_11_AAA_NUM_	DC		Memo		
IQI_11_AAA_RATE			Memo		
IQI_11_AAA_LOW_	EST		Memo		
IQI_11_AAA_HIGH_	Memo				
IQI_19_HIP_FX_NU	Memo				
IQI_19_HIP_FX_RA	Memo				
IQI_19_HIP_FX_LO	Memo				
IQI_19_HIP_FX_HIC		Memo			
IQI_91_CONDS_NU	Memo				
IQI_91_CONDS_RA	Memo				
IQI_91_CONDS_LO	Memo				
IQI_91_CONDS_HIC			Memo		

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_AHRQ_STAT	HOSP_AHRQ_STATE	AHRQ PSI and IQI State
	E		Results
Description	AHRQ PSI and IQI measures state-level results		
Column Name DDB Data Type			
State			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(Back to Table Listing)	vwHQI_HOSP_AHRQ_STAT	HOSP_AHRQ_STATE	AHRQ PSI and IQI State
	E		Results
Description	AHRQ PSI and IQI measures sta	ate-level results	
Column Name			DDB Data Type
PSI_4_SURG_COMP	_WORSE		Memo
PSI_4_SURG_COMP	_SAME		Memo
PSI_4_SURG_COMP	_BETTER		Memo
PSI_4_SURG_COMP	_TOOFEW		Memo
PSI_6_IAT_PTX_WC	DRSE		Memo
PSI_6_IAT_PTX_SA	ME		Memo
PSI_6_IAT_PTX_BE	TTER		Memo
PSI_6_IAT_PTX_TO	OFEW		Memo
PSI_11_POSTOP_RE	SPFAIL_WORSE		Memo
PSI_11_POSTOP_RE	SPFAIL_SAME		Memo
PSI_11_POSTOP_RE			Memo
PSI_11_POSTOP_RE	SPFAIL_TOOFEW		Memo
PSI_12_POSTOP_PU	LMEMB_DVT_WORSE		Memo
	LMEMB_DVT_SAME		Memo
	LMEMB_DVT_BETTER		Memo
PSI_12_POSTOP_PU	LMEMB_DVT_TOOFEW		Memo
PSI_14_POSTOP_DE	HIS_WORSE		Memo
PSI_14_POSTOP_DE	HIS_SAME		Memo
PSI_14_POSTOP_DE	HIS_BETTER		Memo
PSI_14_POSTOP_DE	HIS_TOOFEW		Memo
PSI_15_ACC_LAC_V	VORSE		Memo
PSI_15_ACC_LAC_S	SAME		Memo
PSI_15_ACC_LAC_E	BETTER		Memo
PSI_15_ACC_LAC_T	COOFEW		Memo
PSI_90_SAFETY_WO	ORSE		Memo
PSI_90_SAFETY_SA	ME		Memo
PSI_90_SAFETY_BE	TTER		Memo
PSI_90_SAFETY_TC	OFEW		Memo
IQI_11_AAA_WORS	E		Memo
IQI_11_AAA_SAME			Memo
IQI_11_AAA_BETTE	ER		Memo
IQI_11_AAA_TOOFI	IQI_11_AAA_TOOFEW		
	IQI_19_HIP_FX_WORSE		
IQI_19_HIP_FX_SAME			Memo Memo
	IQI_19_HIP_FX_BETTER		
IQI_19_HIP_FX_TOOFEW			Memo
IQI_91_CONDS_WORSE			Memo
IQI_91_CONDS_SAME			Memo
IQI_91_CONDS_BET	Memo		
IQI_91_CONDS_TO	OFEW		Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
Table Maile	I Hysicai. Access	I hysical. CS v Flat Files	Dusiness

(Back to Table Listing)	vwHQI_HOSP_AHRQ_NATI	HQI_HOSP_AHRQ_NATION	AHRQ PSI and IQI National
	ONAL	AL	Results
Description	AHRQ PSI and IQI measures na		
Column Name			DDB Data Type
MSR_CD			Memo
NATIONAL			Memo
PSI_NATIONAL_SCR			Memo
IQI_NATIONAL_SCR			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_ED	HQI_HOSP_ED	Process of Care — Emergency
			Department Hospital Results
Description	Process of Care—Emergency D	epartment measures hospital-level	results
Column Name			DDB Data Type
prvdr_id			Memo
msr_cd			Memo
scr			Memo
footnote			Memo
Sample			Memo

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Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_ED_State	HQI_HOSP_ED_State	Process of Care — Emergency
			Department State Results
Description	Process of Care—Emergency De	epartment measures state-level res	ults
Column Name			DDB Data Type
prvdr_id (Two character state abbreviaton)			Memo
msr_cd			Memo
scr			Memo
footnote			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_ED_National	HQI_HOSP_ED_US	Process of Care — Emergency
			Department National Results
Description	Process of Care—Emergency December 2	epartment measures national resul	ts
Column Name			DDB Data Type
prvdr_id			Memo
msr_cd			Memo
scr			Memo
footnote			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_HAC	HQI_HOSP_HAC	Hospital-Acquired Conditions
			Hospital Results
Description	Hospital-Acquired Conditions m	easures hospital-level results	
Column Name			DDB Data Type
prvdr_id			Memo
msr_cd			Memo
scr			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_HAC_NATIO	HQI_HOSP_HAC_NATIONA	Hospital-Acquired Conditions
	NAL	L	National Results
Description	Hospital-Acquired Conditions m		
Column Name			DDB Data Type
msr_cd			Memo
scr			Memo

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Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_HAI	HQI_HOSP_HAI	Healthcare-Associated
			Infections Hospital Results
Description	Healthcare-Associated Infection	s measures hospital-level results	
Column Name			DDB Data Type
prvdr_id			Memo
msr_cd			Memo
scr			Memo
footnote			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_HAI_STATE	HQI_HOSP_HAI_STATE	Healthcare-Associated
			Infections State Results
Description	Healthcare-Associated Infection	ns measures state-level results	
Column Name			DDB Data Type
state (Two digit state abbreviation)			Memo
msr_cd			Memo
scr			Memo
footnote			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_HAI_National	HQI_HOSP_HAI_National	Healthcare-Associated
			Infections National Results
Description	Healthcare-Asssicoated Infection	ns measures national results	
Column Name			DDB Data Type
prvdr_id (Defaults to NATION)			Memo
msr_cd			Memo
scr			Memo
footnote	·	·	Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_HCAHPS	HQI_HOSP_HCAHPS_MSR	HCAHPS Hospital Results
	_MSR		_
Description	HCAHPS measures hospital-lev	el results	
Column Name			DDB Data Type
Provider Number			Memo
Hospital Name			Memo
State			Text(2)
HCAHPS Measure Code			Text(25)
HCAHPS Question			Memo
HCAHPS Answer Des	scription		Memo
HCAHPS Answer Percent			Text(50)
Number of Completed Surveys			Text(50)
Survey Response Rate Percent			Text(50)
Footnote			Memo

Table Name Physical: Access	Physical: CSV Flat Files	Business
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(Back to Table Listing)	dbo_vwHQI_STATE_HCAHP	HQI_STATE_HCAHPS_MSR	HCAHPS State Results
	S_MSR		
Description	HCAHPS measures state-level re	esults	
Column Name			DDB Data Type
State			Text(50)
HCAHPS Question			Memo
HCAHPS Measure Code			Text(25)
HCAHPS Answer Description			Memo
HCAHPS Answer Percent			Text(50)

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_US_NATIONAL	HQI_US_NATIONAL_HCA	HCAHPS National Results
	_HCAHPS_MSR	HPS_MSR	
Description	HCAHPS measures national resu		
Column Name	DDB Data Type		
HCAHPS Measure Co	Text(25)		
HCAHPS Question	Memo		
HCAHPS Answer Des	Memo		
HCAHPS Answer Per	Text(50)		

Table Name	Physical: Access	Physical: CSV Flat Files	Business	
(<u>Back to Table Listing</u>)	Hvbp_ami _02_07_2013	hvbp_ami_02_07_2013	HVBP Process of Care—AMI	
			Results	
Description	Hospital Value-Based Purchas	sing Acute Myocardial Infarction re	esults	
Column Name			DDB Data Type	
Provider Number			Memo	
Hospital Name			Memo	
Address			Memo	
City			Memo	
State			Memo	
ZIP Code	Memo			
County Name	Memo			
AMI-7a Performance	Memo			
AMI-7a Achievement	Memo			
AMI-7a Improvement	Points		Memo	
AMI-7a Measure Scor	re		Memo	
AMI-8a Performance	Memo			
AMI-8a Achievement	Memo			
AMI-8a Improvement Points			Memo	
AMI-8a Measure Scor	Memo			
AMI Condition/Proce	AMI Condition/Procedure Score			

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	Hvbp_hai_02_07_2013	hvbp_hai_02_07_2013	HVBP Healthcare-Associated
	_	_	Infections Results
Description	Hospital Value-Based Purchasin	is results	
Column Name			DDB Data Type
Provider Number			Memo

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Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	Hvbp_hai_02_07_2013	hvbp_hai_02_07_2013	HVBP Healthcare-Associated
			Infections Results
Description	Hospital Value-Based Purchasin	ng Healthcare-Associated Infection	ns results
Column Name			DDB Data Type
Hospital Name			Memo
Address			Memo
City			Memo
State			Memo
ZIP Code			Memo
County Name			Memo
SCIP-Inf-1 Performan	ce Rate		Memo
SCIP-Inf-1 Achieveme	ent Points		Memo
SCIP-Inf-1 Improvement	Memo		
SCIP-Inf-1 Measure S	Memo		
SCIP-Inf-2 Performan	Memo		
SCIP-Inf-2 Achievement	ent Points		Memo
SCIP-Inf-2 Improvement	ent Points		Memo
SCIP-Inf-2 Measure S			Memo
SCIP-Inf-3 Performan	ce Rate		Memo
SCIP-Inf-3 Achieveme	ent Points		Memo
SCIP-Inf-3 Improvement			Memo
SCIP-Inf-3 Measure S	Memo		
SCIP-Inf-4 Performan	ce Rate		Memo
SCIP-Inf-4 Achievement Points			Memo
	SCIP-Inf-4 Improvement Points		
	SCIP-Inf-4 Measure Score		
HAI Condition/Proced	lure Score		Memo

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Table Name	Physical: Access	Physical: CSV Flat Files	Business		
(<u>Back to Table Listing</u>)	Hvbp_hcahps_02_07_2013	hvbp_hcahps_02_07_2013	HVBP HCAHPS Results		
Description	Description Hospital Value-Based Purchasing HCAHPS results				
Column Name			DDB Data Type		
Provider Number	Memo				
Hospital Name			Memo		
Address			Memo		
City			Memo		
State			Memo		
ZIP Code			Memo		
County Name			Memo		
Communication with	Nurses Achievement Points		Memo		
Communication with	Nurses Improvement Points		Memo		
Communication with	Nurses Dimension Score		Memo		
Communication with	Doctors Achievement Points		Memo		
	Doctors Improvement Points		Memo		
Communication with	Doctors Dimension Score		Memo		
	spital Staff Achievement Points		Memo		
Responsiveness of Ho	Memo				
Responsiveness of Hospital Staff Dimension Score			Memo		
Pain Management Acl			Memo		
Pain Management Imp			Memo		
Pain Management Dir			Memo		
	Medicines Achievement Points		Memo		
	Medicines Improvement Points		Memo		
	Medicines Dimension Score		Memo		
	ness of Hospital Environment Ac		Memo		
	ness of Hospital Environment Im		Memo		
	ness of Hospital Environment Di	mension Score	Memo		
Discharge Information			Memo Memo		
<u> </u>	Discharge Information Improvement Points				
Discharge Information			Memo		
	pital Achievement Points		Memo		
	pital Improvement Points		Memo		
	pital Dimension Score		Memo		
HCAHPS Base Score			Memo		
HCAHPS Consistency	y Score		Memo		

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Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	Hvbp_hf_02_07_2013	hvbp_hf_02_07_2013	HVBP Process of Care—Heart
			Failure Results
Description	Hospital Value-Based Purchas	ing Process of Care—Heart Failure	e results
Column Name			DDB Data Type
Provider Number			Memo
Hospital Name			Memo
Address			Memo
City	Memo		
State			Memo
ZIP Code			Memo
County Name			Memo
HF-1 Performance Rate			Memo
HF-1 Achievement Points			Memo
HF-1 Improvement Points			Memo
HF-1 Measure Score			Memo
HF-1 Condition/Proced	lure Score		Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	Hvbp_pn_02_07_2013	hvbp_pn_02_07_2013	HVBP Process of Care—
			Pneumonia Results
Description	Hospital Value-Based Purcha	asing Process of Care—Pneumonia	measure results
Column Name			DDB Data Type
Provider Number			Memo
Hospital Name			Memo
Address			Memo
City			Memo
State	Memo		
ZIP Code	Memo		
County Name	Memo		
PN-3b Performance R	Memo		
PN-3b Achievement Points			Memo
PN-3b Improvement P	Points		Memo
PN-3b Measure Score			Memo
PN-6 Performance Rat	PN-6 Performance Rate		
PN-6 Achievement Points			Memo
PN-6 Improvement Po	PN-6 Improvement Points		
PN-6 Measure Score	PN-6 Measure Score		
PN Condition/Procedu	ire Score	·	Memo

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Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	Hvbp_scip_02_07_2013	hvbp_scip_02_07_2013	HVBP Process of Care—
			Surgical Improvement Care
			Program Results
Description	Hospital Value-Based Purchasi	ng Process of Care—Surgical Imp	ě
Column Name			DDB Data Type
Provider Number			Memo
Hospital Name			Memo
Address			Memo
City			Memo
State			Memo
ZIP Code	Memo		
County Name	Memo		
SCIP-Card-2 Perform			Memo
SCIP-Card-2 Achieve	ment Points		Memo
SCIP-Card-2 Improvement Points			Memo
SCIP-Card-2 Measure Score			Memo
SCIP-VTE-1 Performance Rate			Memo
SCIP-VTE-1 Achieve	ment Points		Memo
SCIP-VTE-1 Improve	ement Points		Memo
SCIP-VTE-1 Measure Score			Memo
SCIP-VTE-2 Perform	Memo		
SCIP-VTE-2 Achieve	Memo		
SCIP-VTE-2 Improve	Memo		
SCIP-VTE-2 Measure	Memo		
SCIP Condition/Proce	edure Score		Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business	
(<u>Back to Table Listing</u>)	Hvbp_tps_02_07_2013	hvbp_tps_02_07_2013	HVBP Total Performance	
			Score Results	
Description	Overall performance score for H	Hospital Value-Based Purchasing		
Column Name			DDB Data Type	
Provider Number			Memo	
Hospital Name			Memo	
Address	Memo			
City	Memo			
State	Memo			
ZIP Code			Memo	
County Name			Memo	
Unweighted Normaliz	Memo			
Weighted Clinical Process of Care Domain Score Memo				
Unweighted Patient Ex	Memo			
Weighted Patient Expo	Memo			
Total Performance Sco	ore		Memo	

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_IMG_X	HQI_HOSP_IMG_XWLK	Outpatient Imaging Efficiency
	WLK		Hospital Results

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Description	Outpatient Imaging Efficiency measures hospital-level results	
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
State		Text(2)
Condition		Text(22)
Measure Code		Text(25)
Measure Name		Memo
Score		Text(50)
Sample		Text(50)
Footnote		Text(50)

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_STATE_IMG_A	HQI_STATE_IMG_AVG	Outpatient Imaging Efficiency
	VG		State Results
Description	Outpatient Imaging Efficiency n	neasures state-level results	
Column Name			DDB Data Type
State			Text(50)
Condition			Text(22)
Measure Code			Text(25)
Measure Name			Memo
Score			Text(50)

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_US_NATIONAL	HQI_US_NATIONAL_IMG_	Outpatient Imaging Efficiency
	_IMG_AVG	AVG	National Results
Description	Outpatient Imaging Efficiency n	neasures national results	
Column Name			DDB Data Type
Condition			Text(22)
Measure Code			Text(25)
Measure Name			Memo
Score			Text(50)

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Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_IMM	HQI_HOSP_IMM	Process of Care —
			Immunization Hospital Results
Description	Process of Care—Immunization	measures hospital-level results	
Column Name			DDB Data Type
prvdr_id			Memo
msr_cd			Memo
Scr			Memo
footnote			Memo
Sample			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_IMM_State	HQI_HOSP_IMM_State	Process of Care —
			Immunization State Results
Description			
Column Name			DDB Data Type
prvdr_id (Two character state abbreviaton)			Memo
msr_cd			Memo
scr			Memo
footnote			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_IMM_Nationa	HQI_HOSP_IMM_US	Process of Care —
	1		Immunization National
			Results
Description	Process of Care — Immunization	n measures national results	
Column Name			DDB Data Type
prvdr_id			Memo
msr_cd			Memo
scr			Memo
footnote			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_MORTA	HQI_HOSP_MORTALITY_R	30-Day Mortality and
	LITY_READM_XWLK	EADM_XWLK	Readmission Hospital Results
Description	30-Day Mortality and Readmiss	ion measures hospital-level results	S
Column Name			DDB Data Type
Provider Number			Memo
Hospital Name			Memo
State			Text(2)
Condition			Text(13)
Measure Name			Memo
Mortality_Readm Rate			Text(50)
Comparison to Nation	Comparison to National Rate		
Lower Mortality_Readm Estimate			Text(50)
Upper Mortality_Readm Estimate			Text(50)
Number of Patients			Text(50)
Footnote			Text(50)

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Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_STATE_MORT	HQI_STATE_MORTALITY_	30-Day Mortality and
	ALITY_READM_SCRE	READM_SCRE	Readmission State Results
Description	Description 30-Day Mortality and Readmission measures state-level results		
Column Name			DDB Data Type
State			Text(50)
Condition			Memo
Measure Name			Memo
Category			Text(36)
Number of Hospitals		·	Text(50)

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_US_NATIONAL	HQI_US_NATIONAL_MOR	30-Day Mortality and
	_MORTALITY_READM_RA	TALITY_READM_RATE	Readmission National Results
	TE		
Description	30-Day Mortality and Readmiss		
Column Name			DDB Data Type
Condition			Memo
Measure Name			Memo
National Mortality_Readm Rate			Text(50)

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_MPV_M	HQI_HOSP_MPV_MSR	Medicare Volume Hospital
	SR		Results
Description	Medicare Volume measures hos	pital-level results	
Column Name			DDB Data Type
Provider Number			Memo
Hospital Name			Memo
State			Text(2)
Diagnosis Related Group ID			Text(25)
Diagnosis Related Group Name			Memo
Number Of Cases			Text(50)

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_STATE_MPV_	HQI_STATE_MPV_MSR	Medicare Volume State
	MSR		Results
Description	Medicare Volume measures stat	e-level results	
Column Name			DDB Data Type
State			Text(50)
Diagnosis Related Group ID			Text(25)
Diagnosis Related Group Name			Memo
Number Of Cases			Text(50)

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_US_NATIONAL	HQI_US_NATIONAL_MPV_	Medicare Volume National
	_MPV_MSR	MSR	Results

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Description	Medicare Volume measures national results	
Column Name		DDB Data Type
State (Defaults to NATION)		Text(50)
Diagnosis Related Group ID		Text(25)
Diagnosis Related Group Name		Memo
Number Of Cases		Text(50)

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_SPP	HQI_HOSP_SPP	Medicare Spending Per Patient
			Hospital Results
Description	Medicare Spending Per Patient 1	measure hospital-level results	
Column Name DDB Data Type			DDB Data Type
prvdr_id Memo			Memo
scr			Memo
msr_cd			Memo
ftnt_id			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_SPP_Stat	HQI_HOSP_SPP_State	Medicare Spending Per Patient
	e		State Results
Description	Medicare Spending Per Patient r	neasure state-level results	
Column Name DDB Data Type			DDB Data Type
prvdr_id	prvdr_id Memo		
msr_cd Memo			Memo
scr			Memo
ftnt_value			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_SPP_Nati	HQI_HOSP_SPP_National	Medicare Spending Per Patient
	onal		National Results
Description	Medicare Spending Per Patient r	neasure national results	
Column Name D			DDB Data Type
prvdr_id			Memo
msr_cd			Memo
scr			Memo
ftnt value			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_STRUCT	HQI_HOSP_STRUCTURAL_	Structural Hospital Results
	URAL_XWLK	XWLK	
Description Structural measures hospital-level results			
Column Name DDB Data Type			DDB Data Type
Provider Number Memo			Memo
Hospital Name	Hospital Name		
State			Text(2)
Measure Code			Text(25)
Measure Name			Memo

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Measure Response	Text(50)

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	vwHQI_READM_REDUCTI	HQI_READM_REDUCTION	Readmission Reduction
	ON		Hospital Results
Description	Readmission Reduction measure	es hospital-level results	
Column Name			DDB Data Type
Hospital Name	Hospital Name Text(255)		
Provider Number Text(255)			Text(255)
State Text(255)			
Measure Name Text(255)			Text(255)
Number of Discharges Text(255)		Text(255)	
Footnote Text(255)			
Excess Readmission Ratio Text(255)		Text(255)	
Predicted Readmission Rate Text(255)			Text(255)
Expected Readmission Rate Text(255)		Text(255)	
Number of Readmissions Te		Text(255)	
Start Date Text(255)			Text(255)
End Date Text(255)			Text(255)

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_MSR_X	HQI_HOSP_MSR_XWLK	Process of Care Hospital
	WLK		Results
Description	Process of Care measures hospit	al-level results	
Column Name DDB Data Type			DDB Data Type
Provider Number Memo			
Hospital Name			Memo
State			Text(2)
Condition			Memo
Measure Code			Text(25)
Measure Name			Memo
Score			Text(50)
Sample			Text(50)
Footnote			Memo

Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_STATE_MSR_A	HQI_STATE_MSR_AVG	Process of Care State Results
	VG		
Description	Process of Care measures state-le	evel results	
Column Name DDB Data Type			DDB Data Type
State Text(50)			Text(50)
Condition			Memo
Measure Name Memo			Memo
Measure Code			Text(25)
Score			Text(50)

Table Name	Physical: Access	Physical: CSV Flat Files	Business

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(Back to Table Listing)	dbo_vwHQI_US_National_M	HQI_US_National_MSR_AV	Process of Care National
	SR_AVG	G	Results
Description	Process of Care measures nation	al results	
Column Name			DDB Data Type
Provider Number (Def	faults to Nation)		Text(50)
Condition			Text(33)
Measure Name			Memo
Score			Text(50)
Table Name	Physical: Access	Physical: CSV Flat Files	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_PCTL_MSR_X	HQI_PCTL_MSR_XWLK	Process of Care Top Percentile
	WLK		Scores
Description		10) percent of hospitals and the na	ational average score for each
C I N	Process of Care measure		DDD D 4 T
Column Name			DDB Data Type
Measure Name	Measure Name Memo		
Condition			Memo
Measure Code		Text(25)	
Percentile			Text(68)
Score			Text(50)

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CSV Revised Flat Files and Data.Medicare.gov Data File Summary

The table below shows the titles of the CSV Revised Flat File and Data.Medicare.gov file names.

CSV Revised file name:	Data.Medicare.gov
Hospital_Revised_flatfiles.zip	Data.ivicalcarc.gov
Hospital_Revised_Flatfiles.pdf	
Readme.txt	
CSV Revised Data File Names (.csv)	Data.Medicare.gov File Names
Hospital_Data	Hospital General Information
Measure Dates	Measure Dates
FootNote	Hospital Footnote Crosswalk
Hospital ACS Measures	Hospital ACS Measures
Agency for Healthcare Research and Quality	Agency for Healthcare Research and Quality Measures
Agency for Healthcare Research and Quality - State	Agency for Healthcare Research and Quality - State Measures
Agency for Healthcare Research and Quality - National	Agency for Healthcare Research and Quality - National Measures
Emergency Department Throughput	Emergency Department Care Measures
Emergency Department Throughput-State	Emergency Department Care Measures - State
Emergency Department Throughput-National	Emergency Department Care Measures - National
Healthcare_Associated_Infections	Healthcare Associated Infections
Healthcare_Associated_Infections_State	Healthcare Associated Infections - State Measures
Healthcare_Associated_Infections_National	Healthcare Associated Infections National
Hospital Acquired Condition	Hospital Acquired Condition Measures
Hospital Acquired Condition - National	Hospital Acquired Condition - National Measures
HCAHPS Measures	Survey of Patients' Hospital Experiences (HCAHPS)
HCAHPS Measures - State	Survey of Patients' Hospital Experiences (HCAHPS) - State Average
HCAHPS Measures - National	Survey of Patients' Hospital Experiences (HCAHPS) - National Average
hvbp_ami_02_07_2013	Hospital Value-Based Purchasing (HVBP) – Acute Myocardial Infarction Scores
hvbp_hai_02_07_2013	Hospital Value-Based Purchasing (HVBP) – Healthcare- Associated Infection Scores
hvbp_hcahps_02_07_2013	Hospital Value-Based Purchasing (HVBP) – Patient Experience of Care Domain Scores (HCAHPS)
hvbp_hf_02_07_2013	Hospital Value-Based Purchasing (HVBP) – Heart Failure Scores
hvbp_pn_02_07_2013	Hospital Value-Based Purchasing (HVBP) – Pneumonia Scores
hvbp_scip_02_07_2013	Hospital Value-Based Purchasing (HVBP) – Surgical Care Improvement Project Scores
hvbp_tps_02_07_2013	Hospital Value-Based Purchasing (HVBP) – Total Performance Scores
Immunization	Preventive Care Measures
Immunization-State	Preventive Care Measures - State
Immunization-National	Preventive Care Measures - National

CSV Revised file name:	Data.Medicare.gov
Hospital_Revised_flatfiles.zip	
Hospital_Revised_Flatfiles.pdf	
Readme.txt	
CSV Revised Data File Names (.csv)	Data.Medicare.gov File Names
Medicare Spending Per Patient	Medicare Spending Per Patient
Medicare Spending Per Patient - State	Medicare Spending Per Patient - State
Medicare Spending Per Patient - National	Medicare Spending Per Patient - National
	Spending Breakdown by Claim
Medicare Volume Measures	Hospital Medicare Volume Measures
Medicare Volume Measures - State	Hospital Medicare Volume Measures - State Average
Medicare Volume Measures - National	Hospital Medicare Volume Measures - National Average
Outcome of Care Measures	Hospital Outcome Of Care Measures
Outcome of Care Measures - State	Hospital Outcome Of Care Measures - State
Outcome of Care Measures - National	Hospital Outcome Of Care Measures - National Average
Outpatient Imaging Efficiency Measures	Use Of Medical Imaging Measures
Outpatient Imaging Efficiency Measures - State	Use Of Medical Imaging Measures - State
Outpatient Imaging Efficiency Measures - National	Use Of Medical Imaging Measures - National
Process of Care Measures - Children	Hospital Process of Care Measures - Children's Asthma
Process of Care Measures - Heart Attack	Hospital Process of Care Measures - Heart Attack
Process of Care Measures - Heart Failure	Hospital Process of Care Measures - Heart Failure
Process of Care Measures - Pneumonia	Hospital Process of Care Measures - Pneumonia
Process of Care Measures - SCIP	Hospital Process of Care Measures - Surgical Care
	Improvement Project
Process of Care Measures - State	Hospital Process of Care Measures - State Average
Process of Care Measures - National	Hospital Process of Care Measures - National Average
READMISSION REDUCTION	Hospital Readmission Reduction
Structural Measures	Hospital Structural Measures - Cardiac Surgery Registry
Measure Crosswalk	
	Hospital Compare - CASPER/ASPEN Contacts

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CSV Revised Flat Files and Data.Medicare.gov Data Content Summary

Note: Fields having the data type of "memo" do not require a length. They allow the user to input large amounts of text without limit. Fields having the data type of "Text" require the corresponding length provided.

Table Name (Back to Table Listing)	Physical: Revised CSV I File	Flat	Physical: Data.Medicare.gov	Business	
	Hospital_Data		Hospital General Information	Hospital C	Characteristics
Description	General information on ho	ospital	s within the dataset		
CSV Revised File Co	lumn Name	Data	.Medicare.gov Column Name		DDB Data Type
Provider Number		Provi	ider Number		Memo
Hospital Name		Hosp	oital Name		Memo
Address1		Addr	ress1		Memo
Address2		Addr	ress2	Memo	
Address3		Address3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County		County Name		Text(25)	
Phone Number		Phon	Phone Number		Text(10)
Hospital Type		Hosp	oital Type		Text(50)
Hospital Ownership Hos		Hosp	oital Owner		Text(100)
Emergency Services		Eme	rgency Services		Text(50)
		Loca	tion		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV I File	Flat	Physical: Data.Medicare.gov	Business	
	Measure_Dates		Measure Dates	Measure D	Oata Collection
				Periods	
Description	Current collection dates for	or avai	lable measures included in the Do	wnloadable	Database
CSV Revised File Column Name		Data.Medicare.gov Column Name			DDB Data Type
Measure Name		Measure Name			Memo
Measure Start Quarter		Measure Start Quarter		Memo	
Measure Start Date Mea		Meas	Measure Start Date		Memo
Measure End Quarter Meas		Meas	ure End Quarter		Memo
Measure End Date		Meas	ure End Date		Memo

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Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business				
	FootNote		Hospital Footnote Crosswalk	Footnotes				
Description	Look up table for footnot	Look up table for footnote text in the various data files						
CSV Revised File Co	CSV Revised File Column Name Da		Medicare.gov Column Name		DDB Data Type			
Footnote	Footnote Footnote		ote		Text (50)			
Footnote Text		Footno	ote Text		Memo			

Table Name (Back to Table Listing)	Physical: Revised CSV Flat 1 File		Physical: Data.Medicare.gov	Business	
	Hospital ACS Measures		Hospital ACS Measures	Hospital A	CS Measures
Description	American College of Sur	geons (ACS) hospital-level results		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
CCN		CCN			Text (6)
Hospital Name		Hospital Name			Memo
Surg65		Surg65			Memo
Surg65_FN		Surg65_FN			Memo
Colon		Colon			Memo
Colon_FN		Colon_FN			Memo
LowExtBypass		LowExtBypass			Memo
LowExtBypass_FN		LowE	xtBypass_FN		Memo

Table Name	Physical: Revised CSV Flat		Physical: Data.Medicare.gov Business			
(<u>Back to Table Listing</u>)	File					
	Agency for Healthcare		Agency for Healthcare	AHRQ PS	SI and IQI Hospital	
	Research and Quality		Research and Quality	Results		
			Measures			
Description	AHRQ PSI and IQI meas	sures ho	ospital-level results			
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type	
Provider Number		Provid	der Number		Memo	
Hospital Name		Hospi	tal Name		Memo	
Address 1		Addre	ess 1		Memo	
Address 2		Addre	ess 2		Memo	
Address 3		Address 3			Memo	
City		City			Memo	
State		State			Text(2)	
ZIP Code		ZIP Code			Text(5)	
County Name		County Name			Text(25)	
Phone Number		Phone Number			Text(10)	
Death from serious tre	atable complications	Death from serious treatable complications after			Memo	
after surgery		surgery				
Footnote - Death from		Footnote - Death from serious treatable			Memo	
complications after sur		complications after surgery				
	Collapsed lung due to medical treatment		osed lung due to medical treatmen		Memo	
Footnote - Collapsed 1	Footnote - Collapsed lung due to medical		ote - Collapsed lung due to medica	al	Memo	
treatment			nent			
Breathing failure after		Breathing failure after surgery			Memo	
Footnote - Breathing f	ailure after surgery	Footn	ote - Breathing failure after surger	У	Memo	

Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business	
\ <u>=====</u>	Agency for Healthcare Research and Quality		Agency for Healthcare Research and Quality Measures	AHRQ PS Results	I and IQI Hospital
Description	AHRQ PSI and IQI meas	sures ho	spital-level results		
CSV Revised File Co	lumn Name		Medicare.gov Column Name		DDB Data Type
Serious blood clots aft	er surgery	Seriou	is blood clots after surgery		Memo
Footnote - Serious blo	od clots after surgery	Footne	ote - Serious blood clots after surg	gery	Memo
A wound that splits op	en after surgery	A wou	and that splits open after surgery		Memo
Footnote - A wound th	nat splits open after	Footne	ote - A wound that splits open after	er surgery	Memo
surgery					
Accidental cuts and te	ars from medical	Accid	ental cuts and tears from medical	treatment	Memo
treatment					
Footnote - Accidental	cuts and tears from	Footne	ote - Accidental cuts and tears from	m medical	Memo
medical treatment		treatm			
Serious Complications			s Complications		Memo
Footnote - Serious Co	•	Footne	ote - Serious Complications		Memo
Death after surgery to	repair a weakness in the	Death	after surgery to repair a weakness	in the	Memo
abdominal aorta		abdon	ninal aorta		
Footnote - Death after			ote - Death after surgery to repair	Memo	
weakness in the abdor			less in the abdominal aorta		
Deaths after admission	n for broken hip	Death	s after admission for broken hip	Memo	
Footnote - Deaths afte hip	Footnote - Deaths after admission for broken hip		ote - Deaths after admission for br	Memo	
Deaths from Certain C	Conditions	Deaths from Certain Conditions			Memo
Footnote - Deaths from	m Certain Conditions	Footnote - Deaths from Certain Conditions			Memo
Number of Patients - I	Death from serious	Number of Patients - Death from serious treatable			Memo
treatable complication	s after surgery	compl	ications after surgery		
Rate - Death from seri	ous treatable	Rate -	Death from serious treatable com	Memo	
complications after sur	rgery		urgery		
Lower Estimate - Dear	th from serious treatable	Lower	Estimate - Death from serious tre	Memo	
complications after sur		complications after surgery			
	th from serious treatable	Higher Estimate - Death from serious treatable			Memo
complications after sur	rgery	complications after surgery			
Number of Patients - 0	Collapsed lung due to	Number of Patients - Collapsed lung due to			Memo
medical treatment			al treatment		
	due to medical treatment	Rate - Collapsed lung due to medical treatment			Memo
Lower Estimate - Coll	apsed lung due to	Lower	Estimate - Collapsed lung due to	medical	Memo
medical treatment		treatm			
	Higher Estimate - Collapsed lung due to		r Estimate - Collapsed lung due to	medical	Memo
medical treatment		treatm			
Number of Patients - Breathing failure after		Number of Patients - Breathing failure after			Memo
surgery		surgery			
Rate - Breathing failur			Breathing failure after surgery		Memo
Lower Estimate - Breasurgery	athing failure after	Lower	Estimate - Breathing failure after	surgery	Memo
Higher Estimate - Bressurgery	athing failure after	Highe	r Estimate - Breathing failure afte	r surgery	Memo

Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	ov Business		
	Agency for Healthcare		Agency for Healthcare	AHRO PS	SI and IQI Hospital	
	Research and Quality		Research and Quality Results			
			Measures			
Description	AHRQ PSI and IQI meas	sures ho	ospital-level results			
CSV Revised File Col	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type	
Number of Patients - S	Serious blood clots after	Numb	per of Patients - Serious blood clot	s after	Memo	
surgery		surge				
Rate - Serious blood cl	lots after surgery	Rate -	Serious blood clots after surgery		Memo	
Lower Estimate - Serio	ous blood clots after	Lowe	r Estimate - Serious blood clots af	ter surgery	Memo	
surgery						
Higher Estimate - Seri	ous blood clots after	Highe	er Estimate - Serious blood clots at	ter	Memo	
surgery		surge				
Number of Patients - A	A wound that splits open	Numb	per of Patients - A wound that split	s open	Memo	
after surgery			surgery			
	olits open after surgery		A wound that splits open after su		Memo	
Lower Estimate - A we	ound that splits open	Lowe	r Estimate - A wound that splits of	pen after	Memo	
after surgery		surge	•			
Higher Estimate - A w	ound that splits open	_	er Estimate - A wound that splits o	pen after	Memo	
after surgery		surge				
	Accidental cuts and tears	Number of Patients - Accidental cuts and tears			Memo	
from medical treatmen		from medical treatment				
	and tears from medical		Accidental cuts and tears from m	edical	Memo	
treatment		treatn		C	3.4	
Lower Estimate - Acci		Lower Estimate - Accidental cuts and tears from medical treatment			Memo	
from medical treatmen		Higher Estimate - Accidental cuts and tears from			Memo	
Higher Estimate - Acc from medical treatmen			er Estimate - Accidental cuts and to eal treatment	Memo		
Number of Patients - S			per of Patients - Serious Complicat	Memo		
Rate - Serious Complie				Memo		
Lower Estimate - Serie		Rate - Serious Complications Lower Estimate - Serious Complications			Memo	
Higher Estimate - Seri					Memo	
Number of Patients - I		Higher Estimate - Serious Complications Number of Patients - Death after surgery to repair			Memo	
repair a weakness in th		a weakness in the abdominal aorta			IVICIIIO	
	gery to repair a weakness	Rate - Death after surgery to repair a weakness in			Memo	
in the abdominal aorta		the abdominal aorta			1.101110	
	th after surgery to repair	Lower Estimate - Death after surgery to repair a			Memo	
a weakness in the abdo			ness in the abdominal aorta	-r "		
	th after surgery to repair		er Estimate - Death after surgery to	repair a	Memo	
a weakness in the abdo	. .	_	ness in the abdominal aorta	1		
Number of Patients - I			per of Patients - Deaths after admis	ssion for	Memo	
for broken hip		broken hip				
Rate - Deaths after adr	mission for broken hip		Deaths after admission for broken	n hip	Memo	
Lower Estimate - Deat		Lower Estimate - Deaths after admission for			Memo	
broken hip		broke	n hip			
Higher Estimate - Dea	ths after admission for		er Estimate - Deaths after admission	on for	Memo	
broken hip		broke				

Table Name	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business		
(<u>Back to Table Listing</u>)	File					
	Agency for Healthcare		Agency for Healthcare	AHRQ PS	I and IQI Hospital	
	Research and Quality		Research and Quality	Results		
			Measures			
Description	AHRQ PSI and IQI meas	Q PSI and IQI measures hospital-level results				
CSV Revised File Column Name			Medicare.gov Column Name	DDB Data Type		
Number of Patients - I	Deaths from Certain	Number of Patients - Deaths from			Memo	
Conditions		CertainConditions				
Rate - Deaths from Ce	rtain Conditions	Rate -	Deaths from Certain Conditions	Memo		
Lower Estimate - Dear	ths from Certain	Lower	r Estimate - Deaths from Certain C	Conditions	Memo	
Conditions						
Higher Estimate - Dea	ths from Certain	Highe	r Estimate - Deaths from Certain	Conditions	Memo	
Conditions						

Table Name (Back to Table Listing)	Physical: Revised CSV F File	lat	Physical: Data.Medicare.gov	Business	
	Agency for Healthcare Research and Quality - Sta	ate	•		I and IQI State
Description	AHRQ PSI and IQI measu	ıres sta	ate-level results		
CSV Revised File Col	lumn Name	Data	.Medicare.gov Column Name		DDB Data Type
State		State			Memo
Worse - Death from se	rious treatable	Wors	se - Death from serious treatable		Memo
complications after sur	rgery	comp	olications after surgery		
Same - Death from ser	ious treatable	Same	e - Death from serious treatable		Memo
complications after sur			olications after surgery		
Better - Death from se	rious treatable	Bette	er - Death from serious treatable		Memo
complications after sur			olications after surgery		
Too few - Death from	serious treatable	Too few - Death from serious treatable			Memo
complications after sur		complications after surgery			
Worse - Collapsed lung due to medical		Worse - Collapsed lung due to medical treatment			Memo
treatment					
	due to medical treatment	Same - Collapsed lung due to medical treatment			Memo
	g due to medical treatment				Memo
Too few - Collapsed lu	ing due to medical	Too few - Collapsed lung due to medical			Memo
treatment		treatment			
Worse - Breathing fail		Worse - Breathing failure after surgery			Memo
Same - Breathing failu	<u> </u>	Same - Breathing failure after surgery			Memo
Better - Breathing failu	<u> </u>	Better - Breathing failure after surgery			Memo
Too few - Breathing fa	<u> </u>	Too few - Breathing failure after surgery			Memo
Worse - Serious blood		Worse - Serious blood clots after surgery		•	Memo
Same - Serious blood	<u> </u>	Same - Serious blood clots after surgery		•	Memo
Better - Serious blood	<u>_</u>	Better - Serious blood clots after surgery		-	Memo
Too few - Serious bloc		Too few - Serious blood clots after surgery			Memo
	splits open after surgery	Worse - A wound that splits open after surgery			Memo
	splits open after surgery	Same - A wound that splits open after surgery			Memo
	splits open after surgery	Better - A wound that splits open after surgery		Memo	
Too few - A wound that	at splits open after surgery	Too	few - A wound that splits open aft	er surgery	Memo

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Table Name	Physical: Revised CSV F	lat	Physical: Data.Medicare.gov	Business		
(Back to Table Listing)	File Agency for Healthcare Research and Quality - Stat		Research and Quality - State Results		SI and IQI State	
D	ALIDO DOL and IOI massa		Measures			
Description CSV Revised File Co	AHRQ PSI and IQI measu				DDD Data True	
	ts and tears from medical		.Medicare.gov Column Name se - Accidental cuts and tears from	madical	DDB Data Type Memo	
treatment	its and tears from medicar	treati		i iliculcai	Wiemo	
Same - Accidental cut	s and tears from medical	Same	e - Accidental cuts and tears from	medical	Memo	
treatment		treati				
Better - Accidental cur	ts and tears from medical	Bette	er - Accidental cuts and tears from	medical	Memo	
treatment		treati				
Too few - Accidental	cuts and tears from		few - Accidental cuts and tears fro	m medical	Memo	
medical treatment		treati				
Worse - Serious Comp		Worse - Serious Complications			Memo	
Same - Serious Compl		Same - Serious Complications			Memo	
Better - Serious Comp		Better - Serious Complications			Memo	
Too few - Serious Cor		Too few - Serious Complications			Memo	
	rgery to repair a weakness	Worse - Death after surgery to repair a weakness			Memo	
in the abdominal aorta		in the abdominal aorta				
Same - Death after sur in the abdominal aorta	gery to repair a weakness	Same - Death after surgery to repair a weakness in the abdominal aorta			Memo	
	rgery to repair a weakness	Better - Death after surgery to repair a weakness			Memo	
in the abdominal aorta		in the abdominal aorta				
Too few - Death after	surgery to repair a	Too few - Death after surgery to repair a			Memo	
weakness in the abdor	ninal aorta	weakness in the abdominal aorta				
Worse - Deaths after a	dmission for broken hip	Wors	se - Deaths after admission for bro	ken hip	Memo	
Same - Deaths after ac	lmission for broken hip	Same	e - Deaths after admission for brok	en hip	Memo	
Better - Deaths after a	dmission for broken hip	Bette	er - Deaths after admission for bro	ken hip	Memo	
Too few - Deaths after	Too few - Deaths after admission for broken hip		few - Deaths after admission for b	roken hip	Memo	
Worse - Deaths from 0	Certain Conditions	Worse - Deaths from Certain Conditions		ns	Memo	
Same - Deaths from C	ertain Conditions	Same - Deaths from Certain Conditions		S	Memo	
Better - Deaths from C	Certain Conditions	Bette	er - Deaths from Certain Condition	ıs	Memo	
Too few - Deaths from	n Certain Conditions	Too	few - Deaths from Certain Conditi	ons	Memo	

Table Name (Back to Table Listing)	Physical: Revised CSV F File	lat	Physical: Data.Medicare.gov	Business		
	Agency for Healthcare		Agency for Healthcare	AHRQ PS	I and IQI National	
			Research and Quality -	Results		
	National		National Measures			
Description	AHRQ PSI and IQI measures national results					
CSV Revised File Co	lumn Name	Data	Data.Medicare.gov Column Name		DDB Data Type	
U.S. National Rate		U.S. National Rate			Memo	
National Patient Safety	y Measure Performance	Natio	National Patient Safety Measure Performance		Memo	
National Inpatient Qua	National Inpatient Quality Indicators Measure N		National Inpatient Quality Indicators Measure		Memo	
Performance Per		Perfo	Performance			
Measure		Meas	sure		Memo	

Table Name	Physical: Revised CSV Flat		lat Physical: Data.Medicare.gov		
(<u>Back to Table Listing</u>)	File				
	Emergency Department		Emergency Department Care	Process of	Care—Emergency
	Throughput		Measures	Departmen	nt Hospital Results
Description	Process of Care—Emerge	ency Do	epartment measure hospital-level	results	
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Provider ID		Provi	der ID		Memo
Hospital Name		Hospi	ital Name		Memo
Address 1		Addre	ess 1		Memo
Address 2		Address 2			Memo
Address 3		Addre	ess 3		Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP C	Code		Text(5)
County Name		Coun	ty Name		Text(25)
Phone Number		Phone	e Number		Text(10)
Measure	Measure		Measure		Memo
Rate		Rate			Memo
Sample	<u>-</u>	Samp	le		Memo
Footnote		Footn	ote		Memo

Table Name	Physical: Revised CSV I	Flat	Physical: Data.Medicare.gov	Business		
(<u>Back to Table Listing</u>)	File					
	Emergency Department		Emergency Department Care	Process of Care—Emergency		
	Throughput - State		Measures - State	Department State Results		
Description	Process of Care—Emergency Department state-level results					
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type	
Provider ID		Provider ID			Memo	
Measure	Measure		Measure		Memo	
Rate (per 1,000 Discharges)		Rate (per 1,000 Discharges)			Memo	
Footnote		Footn	ote		Memo	

Table Name	Physical: Revised CSV I	Flat	Physical: Data.Medicare.gov	Business		
(<u>Back to Table Listing</u>)	File					
	Emergency Department		Emergency Department Care	Process of Care—Emergency		
	Throughput - National		Measures - National	Department National Result		
Description	Process of Care—Emerge	Process of Care—Emergency Department Hospital Results measure national results				
CSV Revised File Co	lumn Name	Data.Medicare.gov Column Name			DDB Data Type	
Provider ID		Provider ID			Memo	
Measure		Measure			Memo	
Rate (per 1,000 Discharges)		Rate (per 1,000 Discharges)			Memo	
Footnote		Footnote			Memo	

Table Name	Physical: Revised CSV Flat	Physical: Data.Medicare.gov	Business
(<u>Back to Table Listing</u>)	File		
	Healthcare_Associated_Infecti	Healthcare Associated	Healthcare-Associated
	ons	Infections	Infections Hospital Results

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Description	Healthcare-Associa	Healthcare-Associated Infections measures hospital-level results						
CSV Revised File Column Name		Data.Medicare.gov Column Name	DDB Data Type					
Provider ID		Provider ID	Memo					
Hospital Name		Hospital Name	Memo					
Address 1		Address 1	Memo					
Address 2		Address 2	Memo					
Address 3		Address 3	Memo					
City		City	Memo					
State		State	Text(2)					
ZIP Code		ZIP Code	Text(5)					
County Name		County Name	Text(25)					
Phone Number		Phone Number	Text(10)					
Measure		Measure	Memo					
Score		Score	Memo					
Footnote		Footnote	Memo					

Table Name	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business		
(<u>Back to Table Listing</u>)	File					
	Healthcare_Associated_Infecti I		Healthcare Associated	Healthcare-Associated		
	ons_State		Infections - State Measures	Infections State Results		
Description	Healthcare-Associated Infections measures state-level results					
CSV Revised File Co	lumn Name	Data.Medicare.gov Column Name		DDB Data Type		
Provider ID (Two digi	t state abbreviation)	Provider ID (Two digit state abbreviation)			Memo	
Measure	Measure		Measure		Memo	
Score		Score			Memo	
Footnote		Footn	ote		Memo	

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Table Name	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business			
(<u>Back to Table Listing</u>)	File						
	Healthcare_Associated_Infecti I		Healthcare Associated	Healthcare-Associated			
	ons_National		Infections National	Infections National Results			
Description	Healthcare-Associated In	Healthcare-Associated Infections measures national results					
CSV Revised File Co	lumn Name	Data.Medicare.gov Column Name			DDB Data Type		
Provider ID (Defaults	to NATION)	Provider ID (Defaults to NATION)			Memo		
Measure	Measure		Measure		Memo		
Rate (per 1,000 Discharges)		Rate (per 1,000 Discharges)			Memo		
Footnote	·	Footnote			Memo		

Table Name (Back to Table Listing)	Physical: Revised CSV Fla File		at Physical: Data.Medicare.gov B		Business	
	Hospital Acquired Condition		Hospital Acquired Condition Measures	Hospital-Acquired Condition Hospital Results		
Description	Hospital-Acquired Condi	tions n	neasures hospital-level results	_		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type	
Provider ID		Provi	der ID		Memo	
Hospital Name		Hospital Name			Memo	
Address 1	Address 1		ess 1		Memo	
Address 2		Address 2			Memo	
Address 3		Address 3			Memo	
City		City			Memo	
State		State			Text(2)	
ZIP Code		ZIPC	Code		Text(5)	
County Name		County Name			Text(25)	
Phone Number		Phone Number			Text(10)	
Measure		Meas	ure		Memo	
Rate (per 1,000 Discha	arges)	Rate (per 1,000 Discharges)			Memo	

Table Name	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Hospital Acquired Condition - H		Hospital Acquired Condition -	Hospital-Acquired Conditions	
	National		National Measures	National Results	
Description	Hospital-Acquired Condi	tions m	neasures national results		
CSV Revised File Col	lumn Name	Data.Medicare.gov Column Name			DDB Data Type
Measure		Measure			Memo
Score		Score	Score		Memo

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Table Name (Back to Table	Physical: Revised CSV Fla File	t	Physical: Data.Medicare.gov	Business	
<u>Listing</u>)	HCAHPS Measures		Survey of Patients' Hospital Experiences (HCAHPS)	HCAHPS 1	Hospital Results
Description	HCAHPS measures hospital	-level			
CSV Revised File		_	ta.Medicare.gov Column Name		DDB Data Type
Provider Number		Pro	vider Number		Memo
Hospital Name		Но	spital Name		Memo
Address 1			dress 1		Memo
Address 2		Ad	dress 2		Memo
Address 3		Ad	dress 3		Memo
City		Cit	y		Memo
State		Sta	te		Text(2)
ZIP Code		ZIF	Code Code		Text(5)
County Name		Co	unty Name		Text(25)
Phone Number			one Number		Text(10)
nurses "Sometime well.	s who reported that their es" or "Never" communicated	"Sc	cent of patients who reported that to metimes" or "Never" communicate	ed well.	Memo
	s who reported that their communicated well.		cent of patients who reported that t sually" communicated well.	Memo	
	s who reported that their communicated well.		cent of patients who reported that t ways" communicated well.	Memo	
Percent of patient	Percent of patients who reported that their doctors "Sometimes" or "Never"		cent of patients who reported that tetors "Sometimes" or "Never" communications.	Memo	
Percent of patient	s who reported that their communicated well.	Per	cent of patients who reported that tetors "Usually" communicated well	Memo	
Percent of patient	s who reported that their communicated well.	Percent of patients who reported that their doctors "Always" communicated well.			Memo
Percent of patient	s who reported that they Never" received help as soon	Percent of patients who reported that they "Sometimes" or "Never" received help as soon as they wanted.			Memo
Percent of patient	s who reported that they d help as soon as they	Percent of patients who reported that they "Usually" received help as soon as they wanted.			Memo
	s who reported that they d help as soon as they		cent of patients who reported that t ways" received help as soon as the		Memo
Percent of patients who reported that their pain was "Sometimes" or "Never" well controlled.			cent of patients who reported that t s "Sometimes" or "Never" well con		Memo
was "Usually" we		Percent of patients who reported that their pain was "Usually" well controlled.			Memo
was "Always" we		was	cent of patients who reported that t s "Always" well controlled.	Memo	
	s who reported that staff Never" explained about giving it to them.	"Sc	cent of patients who reported that sometimes" or "Never" explained abdicines before giving it to them.		Memo

Table Name (Back to Table	Physical: Revised CSV Flat File	t	Physical: Data.Medicare.gov	Business		
<u>Listing</u>)	HCAHPS Measures		Survey of Patients' Hospital	HCAHPS 1	Hospital Results	
			Experiences (HCAHPS)	1		
Description	HCAHPS measures hospital-	level				
CSV Revised File	Column Name	Dat	ta.Medicare.gov Column Name		DDB Data Type	
	who reported that staff		cent of patients who reported that s		Memo	
	ed about medicines before		sually" explained about medicines b	efore		
giving it to them.			ing it to them.			
	who reported that staff		cent of patients who reported that s		Memo	
•	ed about medicines before		ways" explained about medicines b	efore		
giving it to them.		_	ing it to them.			
	who reported that their		cent of patients who reported that the		Memo	
	n were "Sometimes" or		bathroom were "Sometimes" or "N	lever"		
"Never" clean.		clea			2.6	
	who reported that their		cent of patients who reported that the	neir room	Memo	
	m were "Usually" clean.		bathroom were "Usually" clean.	•	Mana	
-	who reported that their		cent of patients who reported that the	neir room	Memo	
	m were "Always" clean.		bathroom were "Always" clean.		Mana	
	who reported that the area was "Sometimes" or		cent of patients who reported that the		Memo	
"Never" quiet at ni			und their room was "Sometimes" or	Never		
	who reported that the area		et at night. cent of patients who reported that the	Memo		
	was "Usually" quiet at night.		und their room was "Usually" quiet	Memo		
	who reported that the area		cent of patients who reported that the		Memo	
	was "Always" quiet at night.		und their room was "Always" quiet		Wichio	
	at each hospital who		cent of patients who reported that Y	Memo		
-	they were given information		e given information about what to	TVICINO		
about what to do d			r recovery at home.			
	who reported that they were		cent of patients who reported that the	Memo		
	tion about what to do during	not given information about what to do during				
their recovery at h		their recovery at home.				
Percent of patients	who gave their hospital a	Percent of patients who gave their hospital a			Memo	
rating of 6 or lowe	er on a scale from 0 (lowest)	rating of 6 or lower on a scale from 0 (lowest) to				
to 10 (highest).		10 ((highest).			
	who gave their hospital a	Percent of patients who gave their hospital a			Memo	
_	a scale from 0 (lowest) to 10	rating of 7 or 8 on a scale from 0 (lowest) to 10				
(highest).		(highest).				
	their hospital a rating of 9 or		ients who gave their hospital a ratin	•	Memo	
	0 (lowest) to 10 (highest).		on a scale from 0 (lowest) to 10 (his		2.6	
	who reported NO they		cent of patients who reported NO,th	ney would	Memo	
would not recomm			recommend the hospital.	(1 1 1	Marria	
_	Percent of patients who reported YES they		cent of patients who reported YES,	tney would	Memo	
would probably recommend the hospital.			bably recommend the hospital.	thou mould	Mama	
Patients who reported YES they would definitely recommend the hospital.			cent of patients who reported YES,	mey would	Memo	
· ·		definitely recommend the hospital.			Memo	
Number of comple Survey Response I	·		mber of Completed Surveys vey Response Rate Percent		Memo	
Hospital Footnote	ixaic		spital Footnote		Memo	
110spitai rootiiote		1108	Spital Poolifole		INICILIO	

Table Name (Back to Table Listing)	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	File HCAHPS Measures - Sta		Survey of Patients' Hospital Experiences (HCAHPS) - State Average	HCAHPS	State Results
Description	HCAHPS measures state	-level re	esults		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
State		State			Text(50)
Percent of patients wh	o reported that their	Percei	nt of patients who reported that the	eir nurses	Memo
nurses 'Sometimes' or well.			etimes" or "Never" communicated		
Percent of patients wh	o reported that their	Percei	nt of patients who reported that the	eir nurses	Memo
nurses 'Usually' comm	unicated well.	"Usua	lly" communicated well.		
Percent of patients who	o reported that their		nt of patients who reported that the	eir nurses	Memo
nurses 'Always' comm	unicated well.	"Alwa	ys" communicated well.		
Percent of patients who	•		nt of patients who reported that the		Memo
	'Never' communicated		rs "Sometimes" or "Never" comm	unicated	
well.		well.			
Percent of patients wh			nt of patients who reported that the	eir	Memo
doctors 'Usually' comm			rs "Usually" communicated well.		
Percent of patients wh		Percent of patients who reported that their			Memo
doctors 'Always' comm		doctors "Always" communicated well.			
Percent of patients wh		Percent of patients who reported that they			Memo
	received help as soon as	"Sometimes" or "Never" received help as soon as			
they wanted.			vanted.		
Percent of patients wh		Percent of patients who reported that they			Memo
	as soon as they wanted.	"Usually" received help as soon as they wanted.			3.6
Percent of patients wh	ž -	Percent of patients who reported that they			Memo
	as soon as they wanted.	"Always" received help as soon as they wanted.			3.6
	o reported that their pain	Percent of patients who reported that their pain			Memo
was 'Sometimes' or 'No		was "Sometimes" or "Never" well controlled.			2.6
	o reported that their pain	Percent of patients who reported that their pain			Memo
was 'Usually' well con		was "Usually" well controlled.			Momo
was 'Always' well con	o reported that their pain	Percent of patients who reported that their pain			Memo
Percent of patients wh		was "Always" well controlled.			Memo
'Sometimes' or 'Never'	•	Percent of patients who reported that staff "Sometimes" or "Never" explained about		INICILIO	
medicines before givir	•	medicines before giving it to them.			
			nt of patients who reported that sta	nff	Memo
Percent of patients who reported that staff 'Usually' explained about medicines before			lly" explained about medicines be		1,101110
giving it to them.			it to them.		
Percent of patients who reported that staff		Percent of patients who reported that staff			Memo
'Always' explained about medicines before		"Always" explained about medicines before			
giving it to them.			g it to them.	-	
Percent of patients who reported that their			nt of patients who reported that the	Memo	
room and bathroom we			athroom were "Sometimes" or "Ne		
'Never' clean.		clean.			
Percent of patients wh	o reported that their	Percei	nt of patients who reported that the	eir room	Memo

Table Name (Back to Table Listing)	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	HCAHPS Measures - Sta	ite	Survey of Patients' Hospital Experiences (HCAHPS) - State Average	HCAHPS	State Results
Description	HCAHPS measures state	-level re	esults		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
room and bathroom w	ere 'Usually' clean.	and ba	athroom were "Usually" clean.		
Percent of patients wh	o reported that their	Percei	nt of patients who reported that the	eir room	Memo
room and bathroom w	ere 'Always' clean.	and ba	athroom were "Always" clean.		
	o reported that the area		nt of patients who reported that the		Memo
around their room was	'Sometimes' or 'Never'	aroun	d their room was "Sometimes" or	"Never"	
quiet at night.			at night.		
	o reported that the area		nt of patients who reported that the		Memo
	'Usually' quiet at night.		d their room was "Usually" quiet a		
	o reported that the area		nt of patients who reported that the		Memo
	'Always' quiet at night.		d their room was "Always" quiet a		
Percent of patients at 6			nt of patients who reported that Y		Memo
	were given information		given information about what to d	o during	
about what to do durin			ecovery at home.		
	o reported that they were	Percent of patients who reported that they were			Memo
	about what to do during	not given information about what to do during			
their recovery at home		their recovery at home.			
Percent of patients wh		Percent of patients who gave their hospital a			Memo
_	a scale from 0 (lowest)		of 6 or lower on a scale from 0 (le	owest) to	
to 10 (highest).			ghest).	• •	
Percent of patients wh			nt of patients who gave their hosp		Memo
	eale from 0 (lowest) to 10	_	of 7 or 8 on a scale from 0 (lowes	st) to 10	
(highest).	in be emited a metion of the	(highe		4.1 .	Mama
	r hospital a rating of 9 or		nt of patients who gave their hosp		Memo
10 on a scale from 0 (1	owest) to 10 (highest).		of 9 or 10 on a scale from 0 (lowerst)	est) to 10	
Dargant of matiants 1-	o reported NO there	(highe		N WON14	Memo
Percent of patients wh			nt of patients who reported NO,the	ey would	IVICIIIO
would not recommend Percent of patients wh			commend the hospital.	2011 11/21111	Memo
would probably recom		Percent of patients who reported YES, they would probably recommend the hospital.			IVICIIIO
Patients who reported			nt of patients who reported YES,tl	an would	Memo
definitely recommend			tely recommend the hospital.	icy would	IAICHIO
definitely recommend	the hospital.	derilli	icry recommend the nospital.		

Table Name	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business
(<u>Back to Table Listing</u>)	File			
	HCAHPS Measures - National		Survey of Patients' Hospital	HCAHPS National Results
			Experiences (HCAHPS) -	
			National Average	
Description	HCAHPS measures natio	nal res	ults	
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name	DDB Data Type
HCAHPS Question		HCAHPS Question		Memo
HCAHPS Answer Description I		HCAHPS Answer Description		Memo
HCAHPS Answer Per	cent	HCA	HPS Answer Percent	Text(50)

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Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business	
(Back to Tuble Listing)	hvbp_ ami _02_07_2013		Hospital Value-Based Purchasing (HVBP) - Acute Myocardial Infarction Scores	HVBP Pro Results	cess of Care—AMI
Description		rchasin	g Acute Myocardial Infarction res	ults	
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name		Hospi	ital Name		Memo
Address		Addre	ess		Memo
City		City			Memo
State		State			Memo
ZIP Code		ZIP Code			Memo
County Name		County Name			Memo
AMI-7a Performance	Rate	AMI-7a Performance Rate			Memo
AMI-7a Achievement	Points	AMI-7a Achievement Points			Memo
AMI-7a Improvement	Points	AMI-7a Improvement Points			Memo
AMI-7a Measure Scor	re	AMI-7a Measure Score			Memo
AMI-8a Performance	Rate	AMI-8a Performance Rate			Memo
AMI-8a Achievement	Points	AMI-8a Achievement Points			Memo
AMI-8a Improvement Points		AMI-8a Improvement Points			Memo
AMI-8a Measure Score		AMI-8a Measure Score			Memo
AMI Condition/Proceed	dure Score	AMI	AMI Condition Procedure Score		Memo
		Locat	ion		

Table Name	•		Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	hvbp_hai_02_07_2013		Hospital Value-Based	HVBP Hea	althcare-Associated
			Purchasing (HVBP) -	Infections	Results
			Healthcare-Associated		
			Infection Scores		
Description	Hospital Value-Based Pu	rchasin	g Healthcare-Associated Infection	is results	
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name		Hospi	ital Name		Memo
Address		Address		Memo	
City		City			Memo
State		State			Memo
ZIP Code		ZIP Code			Memo
County Name		County Name			Memo
SCIP-Inf-1 Performan	ce Rate	SCIP-Inf-1 Performance Rate			Memo
SCIP-Inf-1 Achieveme	ent Points	SCIP-Inf-1 Achievement Points			Memo
SCIP-Inf-1 Improvement	ent Points	SCIP-Inf-1 Improvement Points		Memo	
SCIP-Inf-1 Measure S	core	SCIP-Inf-1 Measure Score			Memo
SCIP-Inf-2 Performan	SCIP-Inf-2 Performance Rate		SCIP-Inf-2 Performance Rate		Memo
SCIP-Inf-2 Achieveme	SCIP-Inf-2 Achievement Points SCI		SCIP-Inf-2 Achievement Points		Memo
SCIP-Inf-2 Improvement	ent Points	SCIP-	SCIP-Inf-2 Improvement Points		Memo
SCIP-Inf-2 Measure S	core	SCIP	-Inf-2 Measure Score		Memo

Table Name	Physical: Revised CSV Flat		Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	hvbp_hai_02_07_2013		Hospital Value-Based	HVBP Hea	althcare-Associated
			Purchasing (HVBP) -	Infections	Results
			Healthcare-Associated		
			Infection Scores		
Description		rchasin	g Healthcare-Associated Infection	is results	
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
SCIP-Inf-3 Performan	ce Rate	SCIP-Inf-3 Performance Rate			Memo
SCIP-Inf-3 Achieveme	ent Points	SCIP-	-Inf-3 Achievement Points		Memo
SCIP-Inf-3 Improvement	ent Points	SCIP-	SCIP-Inf-3 Improvement Points		Memo
SCIP-Inf-3 Measure S	core	SCIP-	-Inf-3 Measure Score		Memo
SCIP-Inf-4 Performan	ce Rate	SCIP-	IP-Inf-4 Performance Rate		Memo
SCIP-Inf-4 Achieveme	ent Points	SCIP-	CIP-Inf-4 Achievement Points		Memo
SCIP-Inf-4 Improvement	CIP-Inf-4 Improvement Points SCIP		CIP-Inf-4 Improvement Points		Memo
SCIP-Inf-4 Measure S	core	SCIP-	P-Inf-4 Measure Score		Memo
HAI Condition/Proced	lure Score	HAI	Condition Procedure Score		Memo
		Locat	ion		

(Back to Table Listing)	Physical: Revised CSV File	Flat Physical: Data.Medicare.gov Business			
	hvbp_hcahps_02_07_2013		Hospital Value-Based Purchasing (HVBP) - Patient Experience of Care Domain Scores (HCAHPS)	HVBP HC	AHPS Results
Description	Hospital Value-Based Pu				
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Provider Number		Provid	der Number		Memo
Hospital Name		Hospi	tal Name		Memo
Address		Addre			Memo
City		City			Memo
State		State			Memo
ZIP Code		ZIP Code			Memo
County Name	County Name		ty Name		Memo
Communication with I Points	Nurses Achievement	Communication with Nurses Achievement Points			Memo
Communication with I Points	Nurses Improvement	Communication with Nurses Improvement Points			Memo
Communication with I	Nurses Dimension Score	Communication with Nurses Dimension Score			Memo
Communication with I Points	Doctors Achievement	Communication with Doctors Achievement Points		Memo	
Communication with I Points	Doctors Improvement	Communication with Doctors Improvement Points		Memo	
Communication with I	Doctors Dimension Score	Comn	nunication with Doctors Dimension	on Score	Memo
-		Responsiveness of Hospital Staff Achievement Points		vement	Memo
Responsiveness of Ho Points	spital Staff Improvement	•	Responsiveness of Hospital Staff Improvement Points		Memo

Table Name	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File		**	*****	2.44ma n
	hvbp_hcahps_02_07_201	13	Hospital Value-Based	HVBPHO	CAHPS Results
			Purchasing (HVBP) - Patient		
			Experience of Care Domain		
			Scores (HCAHPS)		
Description	Hospital Value-Based Pu				
CSV Revised File Co			Medicare.gov Column Name		DDB Data Type
	spital Staff Dimension	•	onsiveness of Hospital Staff Dime	nsion	Memo
Score		Score			
Pain Management Ach			Management Achievement Points		Memo
Pain Management Imp			Management Improvement Points		Memo
Pain Management Din			Management Dimension Score		Memo
Communication about	Medicines Achievement		nunication about Medicines Achie	evement	Memo
Points		Points	S		
Communication about	Medicines Improvement	Communication about Medicines Improvement			Memo
Points	Points		S		
Communication about	Medicines Dimension	Comn	nunication about Medicines Dime	nsion	Memo
Score		Score			
Cleanliness and Quiet		Cleanliness and Quietness of Hospital			Memo
Environment Achieve	ment Points	Environment Achievement Points			
Cleanliness and Quiet	ness of Hospital	Cleanliness and Quietness of Hospital			Memo
Environment Improve	ment Points	Envir	onment Improvement Points		
Cleanliness and Quiet	ness of Hospital	Cleanliness and Quietness of Hospital			Memo
Environment Dimensi	on Score	Environment Dimension Score			
Discharge Information	Achievement Points	Discharge Information Achievement Points			Memo
Discharge Information	1 Improvement Points	Disch	arge Information Improvement Po	oints	Memo
Discharge Information	n Dimension Score	Disch	arge Information Dimension Scor	e	Memo
Overall Rating of Hos	pital Achievement Points	Overa	all Rating of Hospital Achievemen	t Points	Memo
	Overall Rating of Hospital Improvement Points		all Rating of Hospital Improvemen		Memo
Overall Rating of Hos	Overall Rating of Hospital Dimension Score		all Rating of Hospital Dimension S	Score	Memo
HCAHPS Base Score		HCAHPS Base Score			Memo
HCAHPS Consistency	Score	HCAHPS Consistency Score			Memo
		Locat	ion		

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business	
	hvbp_hf_02_07_2013		Hospital Value-Based		cess of Care—Heart
			Purchasing (HVBP) - Heart Failure Scores	Failure Re	suits
Description	Hospital Value-Based Pur	ng Process of Care—Heart Failure	results		
CSV Revised File Column Name Data		Data	.Medicare.gov Column Name		DDB Data Type
Provider Number		Provi	Provider Number		Memo
Hospital Name		Hosp	Hospital Name		Memo
Address		Addr	ddress		Memo
City		City	Lity		Memo
State	State		State		Memo
ZIP Code ZIP C		Code		Memo	
County Name		Coun	ity Name		Memo

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Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business		
	hvbp_hf_02_07_2013		Hospital Value-Based Purchasing (HVBP) - Heart Failure Scores	HVBP Process of Care—Heart Failure Results		
Description	Hospital Value-Based Pur	Hospital Value-Based Purchasing Process of Care—Heart Failure results				
CSV Revised File Column Name Da		Data	.Medicare.gov Column Name		DDB Data Type	
HF-1 Performance Rate	e	HF-1	Performance Rate		Memo	
HF-1 Achievement Poi	nts	HF-1	Achievement Points		Memo	
HF-1 Improvement Poi	nts	HF-1	HF-1 Improvement Points		Memo	
HF-1 Measure Score		HF-1	Measure Score		Memo	
HF-1 Condition/Procedure Score HF-1		Condition Procedure Score		Memo		
		Loca	tion		Memo	

Table Name (Back to Table Listing)	— — — — — — — — — — — — — — — — — — —		Physical: Data.Medicare.gov	Business	
			Hospital Value-Based Purchasing (HVBP) - Pneumonia Scores	Pneumonia	
Description			g Process of Care—Pneumonia m	easure resul	ts
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name		Hospi	ital Name		Memo
Address		Addre	ess		Memo
City		City	ity		Memo
State		State			Memo
ZIP Code		ZIP C	Code	Memo	
County Name		Coun	ounty Name		Memo
PN-3b Performance R	ate	PN-31	b Performance Rate	Memo	
PN-3b Achievement P	oints	PN-31	b Achievement Points	Memo	
PN-3b Improvement P	Points	PN-31	N-3b Improvement Points		Memo
PN-3b Measure Score		PN-31	PN-3b Measure Score		Memo
PN-6 Performance Rat	te	PN-6	PN-6 Performance Rate		Memo
PN-6 Achievement Po	PN-6 Achievement Points PN-		PN-6 Achievement Points		Memo
PN-6 Improvement Po	PN-6 Improvement Points PN-6		Improvement Points		Memo
PN-6 Measure Score			6 Measure Score		Memo
PN Condition/Procedu	ire Score	PN C	Condition Procedure Score		Memo
		Locat	ion		

Table Name	Physical: Revised CSV F	lat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	hvbp_scip_02_07_2013		Hospital Value-Based	HVBP Pro	cess of Care—
			Purchasing (HVBP) - Surgical	Surgical In	nprovement Care
			Care Improvement Project	Program R	esults
			Scores		
Description	Hospital Value-Based Pure	chasin	g Process of Care—Surgical Impr	ovement Ca	re Program results
CSV Revised File Column Name D		Data.Medicare.gov Column Name			DDB Data Type
Provider Number		Provid	der Number		Memo

Table Name	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	hvbp_scip_02_07_2013		Hospital Value-Based		cess of Care—
			Purchasing (HVBP) - Surgical	_	nprovement Care
			Care Improvement Project	Program R	lesults
	** ** 1		Scores		D 1.
Description			g Process of Care—Surgical Impr	ovement Ca	
CSV Revised File Co	lumn Name		Medicare.gov Column Name		DDB Data Type
Hospital Name		_	ital Name		Memo
Address		Addre	ess		Memo
City		City			Memo
State		State			Memo
ZIP Code		ZIP C	Code	Memo	
County Name		Count	ty Name		Memo
SCIP-Card-2 Performa	ance Rate	SCIP-	-Card-2 Performance Rate		Memo
SCIP-Card-2 Achieve	ment Points	SCIP-Card-2 Achievement Points			Memo
SCIP-Card-2 Improve	ment Points	SCIP-Card-2 Improvement Points			Memo
SCIP-Card-2 Measure	Score	SCIP-Card-2 Measure Score			Memo
SCIP-VTE-1 Performa	ance Rate	SCIP-VTE-1 Performance Rate			Memo
SCIP-VTE-1 Achieve	ment Points	SCIP-	SCIP-VTE-1 Achievement Points		Memo
SCIP-VTE-1 Improve	ment Points	SCIP-	SCIP-VTE-1 Improvement Points		Memo
SCIP-VTE-1 Measure	Score	SCIP-	-VTE-1 Measure Score	Memo	
SCIP-VTE-2 Performa	ance Rate	SCIP-	-VTE-2 Performance Rate		Memo
SCIP-VTE-2 Achieve	ment Points	SCIP-	-VTE-2 Achievement Points		Memo
SCIP-VTE-2 Improve	P-VTE-2 Improvement Points SCIP-		P-VTE-2 Improvement Points		Memo
SCIP-VTE-2 Measure			P-VTE-2 Measure Score		Memo
SCIP Condition/Proce	edure Score	SCIP	Condition Procedure Score		Memo
		Locat	ion		

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov Business		
			Hospital Value-Based Purchasing (HVBP) - Total Performance Scores	HVBP Total Performance Score Results	
Description	Overall performance scor	re for H	Iospital Value-Based Purchasing	I	
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name		Hospital Name			Memo
Address		Address		Memo	
City		City			Memo
State		State		Memo	
ZIP Code		ZIP Code			Memo
County Name		County Name		Memo	
Unweighted Normaliz	ed Clinical Process of	Unweighted Normalized Clinical Process of Care		Memo	
Care Domain Score	C		Domain Score		
Weighted Clinical Process of Care Domain		Weighted Clinical Process of Care Domain Score		Memo	
Score					
Unweighted Patient Experience of Care		Unweighted Patient Experience of Care Domain			Memo

Table Name (Back to Table Listing)	Physical: Revised CSV I	Flat	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	hvbp_ tps _02_07_2013		Hospital Value-Based Purchasing (HVBP) - Total Performance Scores	HVBP Tot Score Resu	al Performance
Description	Overall performance scor	e for H	ospital Value-Based Purchasing		
CSV Revised File Co	lumn Name	Data.Medicare.gov Column Name			DDB Data Type
Domain Score		Score			
Weighted Patient Expo	erience of Care Domain	Weighted Patient Experience of Care Domain		omain	Memo
Score					
Total Performance Score T		Total Performance Score			Memo
		Locat	ion		

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Table Name	Physical: Revised CSV Fl		Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Immunization		Preventive Care Measures	Process of	f Care—
				Immuniza	tion Hospital Results
Description		ization	measures hospital-level results		
CSV Revised File Co	lumn Name Dat	a.Med	icare.gov Column Name		DDB Data Type
Provider ID		Provi	der ID		Memo
Hospital Name		Hospi	ital Name		Memo
Address 1		Address 1			Memo
Address 2		Address 2			Memo
Address 3		Addre	ess 3		Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County Name		County Name			Text(25)
Phone Number		Phone Number			Text(10)
Measure		Measure			Memo
Rate		Rate			Memo
Sample		Samp	le		Memo
Footnote		Footn	ote		Memo

Table Name	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Immunization-State		Preventive Care Measures -	Process of	Care—
			State	Immunization State Results	
Description	Process of Care—Immun	ization	measure state-level results		
CSV Revised File Co	lumn Name	Data.Medicare.gov Column Name		DDB Data Type	
Provider ID (Two char	racter state abbreviaton)	Provider ID (Two character state abbreviaton)		Memo	
Measure	Measure		Measure		Memo
Rate (per 1,000 Discharges)		Rate (per 1,000 Discharges)			Memo
Footnote		Footn	ote		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV I	Flat	Physical: Data.Medicare.gov	Business	
	Immunization-National		Preventive Care Measures - National	Process of Immuniza Results	f Care— tion National
Description	Process of Care—Immun	ization	measures national results		
CSV Revised File Co	lumn Name	Data.Medicare.gov Column Name			DDB Data Type
Provider ID		Provider ID			Memo
Measure		Measure			Memo
Rate (per 1,000 Discharges)		Rate (per 1,000 Discharges)			Memo
Footnote		Footnote			Memo

- 1	Table Name	Physical: Revised CSV Flat	Physical: Data.Medicare.gov	Business
	(Back to Table Listing)	File		
		Medicare Spending Per Patient	Medicare Spending Per Patient	Medicare Spending Per Patient
				Hospital Results

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Description Medicare Spending Per	Medicare Spending Per Patient measures hospital-level results						
CSV Revised File Column Name	Data.Medicare.gov Column Name	DDB Data Type					
Provider ID	Provider ID	Memo					
Hospital Name	Hospital Name	Memo					
Address 1	Address 1	Memo					
Address 2	Address 2	Memo					
Address 3	Address 3	Memo					
City	City	Memo					
State	State	Text(2)					
ZIP Code	ZIP Code	Text(5)					
County Name	County Name	Text(25)					
Phone Number	Phone Number	Text(10)					
Measure	Measure	Memo					
Spending per Hospital Patient with Medicare	Spending per Hospital Patient with Medicare	Memo					
Footnote	Footnote	Memo					

Table Name	Physical: Revised CSV I	Flat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Medicare Spending Per		Medicare Spending Per Patient	Medicare S	Spending Per Patient
	Patient-State		- State	State Results	
Description	Medicare Spending Per Pa	atient r	neasures state-level results		
CSV Revised File Co	lumn Name	Data.Medicare.gov Column Name			DDB Data Type
Provider ID		Provider ID			Memo
Measure		Measure			Memo
Score		Score			Memo
Footnote		Footn	ote		Memo

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Table Name	Physical: Revised CSV I	Flat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Medicare Spending Per		Medicare Spending Per Patient	Medicare Spending Per Patient	
	Patient-National		- National	National Results	
Description	Medicare Spending Per P	atient r	neasures national results		
CSV Revised File Co	lumn Name	Data.Medicare.gov Column Name			DDB Data Type
Provider ID		Provider ID			Memo
Measure		Measure			Memo
Score		Score			Memo
Footnote		Footn	ote		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV I File	lat Physical: Data.Medica	are.gov Business	
		Spending Breakdown B	y Medicare	Spending Per Patient
		Claim	- Spendin	g Breakdown By
			Claim	
Description	1 5	tient measures spending break	<u> </u>	
CSV Revised File Co	lumn Name	Data.Medicare.gov Column I	Name	DDB Data Type
		Hospital Name		Memo
		Provider Number		Memo
		State	Text (2)	
		Period	riod	
		Claim Type	m Type	
		Avg Spending Per Episode (Ho	Memo	
	Avg		g Spending Per Episode (State)	
Avg		Avg Spending Per Episode (Na	g Spending Per Episode (Nation)	
		Percent of Spending (Hospital)	cent of Spending (Hospital)	
		Percent of Spending (State)	ent of Spending (State)	
		Percent of Spending (Nation)	ent of Spending (Nation)	

Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business	
	Medicare Volume Measu	res	Hospital Medicare Volume	Medicare V	Volume Hospital
			Measures	Results	
Description	Medicare Volume measu	res hos	pital-level results		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name		Hospi	ital Name		Memo
Address 1	Address 1		ess 1		Memo
Address 2		Address 2			Memo
Address 3		Address 3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County Name		County Name			Text(25)
Phone Number		Phone Number			Text(10)
Diagnosis Related Group		Diagr	Diagnosis Related Group		Text(25)
Number Of Cases		Numb	Number Of Cases		Text(50)

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Table Name	Physical: Revised CSV l	Flat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Medicare Volume Measures		Hospital Medicare Volume	Medicare Volume Hospital	
			Measures	Results	
Description Medicare Volume measures hosp		pital-level results			
CSV Revised File Column Name Da		Data.	Medicare.gov Column Name		DDB Data Type
Footnote		Footn	ote		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV I	Flat	Physical: Data.Medicare.gov	Business	
	Medicare Volume Measures - H		Hospital Medicare Volume	Medicare Volume State	
	State		Measures - State Average	Results	
Description	Medicare Volume measures state results				
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
State		State			Text(50)
Diagnosis Related Gro	Diagnosis Related Group Dia		osis Related Group		Text(25)
Number Of Cases Nu		Numb	per Of Cases		Text(50)
Footnote		Footn	ote		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Fl File	at	Physical: Data.Medicare.gov	Business	
	Medicare Volume Measures - I		Hospital Medicare Volume	Medicare V	Volume National
			Measures - National Average	Results	
Description	Medicare Volume measure	s natio	onal results		
CSV Revised File Co	olumn Name 1	Data.l	Medicare.gov Column Name		DDB Data Type
Diagnosis Related Group Diagnosis		Diagn	osis Related Group		Text(25)
Number Of Cases	1	Numb	er Of Cases		Text(50)

Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business	
	Outcome of Care Measur	e	Hospital Outcome Of Care	30-Day Mo	ortality and
			Measures		on Hospital Results
Description	30-Day Mortality and Re	1	ion measures hospital-level results	S	
CSV Revised File Co.	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Provider Number		Provid	der Number		Memo
Hospital Name		Hospi	tal Name		Memo
Address 1		Address 1			Memo
Address 2		Address 2			Memo
Address 3		Address 3			Memo
City		City		Memo	
State		State		Text(2)	
ZIP Code		ZIP Code		Text(5)	
County Name		Count	ty Name		Text(25)
Phone Number		Phone	e Number		Text(10)
Hospital 30-Day Death (Mortality) Rates from		Hospital 30-Day Death (Mortality) Rates from		Memo	
Heart Attack		Heart Attack			
Comparison to U.S. Rate - Hospital 30-Day		Comparison to U.S. Rate - Hospital 30-Day Death			Memo
Death (Mortality) Rate	es from Heart Attack	(Mortality) Rates from Heart Attack			

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Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov			
	Outcome of Care Measur	re	Hospital Outcome Of Care Measures	ortality and on Hospital Results		
Description	Description 30-Day Mortality and Readmission measures hospital-level results					
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type	
Lower Mortality Estin			r Mortality Estimate - Hospital 30	•	Memo	
Death (Mortality) Rate			(Mortality) Rates from Heart Atta			
Upper Mortality Estim	•		Mortality Estimate - Hospital 30-	•	Memo	
Death (Mortality) Rate			(Mortality) Rates from Heart Atta			
	Hospital 30-Day Death		er of Patients - Hospital 30-Day I	Death	Memo	
(Mortality) Rates from			ality) Rates from Heart Attack			
_	Day Death (Mortality)		ote - Hospital 30-Day Death (Mor	tality)	Memo	
Rates from Heart Atta			from Heart Attack			
<u> </u>	h (Mortality) Rates from	•	tal 30-Day Death (Mortality) Rate	es from	Memo	
Heart Failure			Failure			
Comparison to U.S. R	¥ .	_	arison to U.S. Rate - Hospital 30-	Day Death	Memo	
Death (Mortality) Rate			ality) Rates from Heart Failure		3.6	
Lower Mortality Estin	•		r Mortality Estimate - Hospital 30	-	Memo	
Death (Mortality) Rate			(Mortality) Rates from Heart Fail		3.6	
Upper Mortality Estim	•		Mortality Estimate - Hospital 30-		Memo	
Death (Mortality) Rate		Death (Mortality) Rates from Heart Failure			3.4	
	Hospital 30-Day Death	Number of Patients - Hospital 30-Day Death			Memo	
(Mortality) Rates from		(Mortality) Rates from Heart Failure Footnote - Hospital 30-Day Death (Mortality)			3.4	
	D-Day Death (Mortality)			tality)	Memo	
Rates from Heart Failu			from Heart Failure	- C	Mana	
<u> </u>	h (Mortality) Rates from	Hospital 30-Day Death (Mortality) Rates from			Memo	
Pneumonia Comparison to U.S. B.	ata Hamital 20 Day	Pneumonia Comparison to U.S. Poto, Hospital 20 Day Dooth			Mama	
Comparison to U.S. R		Comparison to U.S. Rate - Hospital 30-Day Death			Memo	
Death (Mortality) Rate	nate - Hospital 30-Day	(Mortality) Rates from Pneumonia			Memo	
Death (Mortality) Rate	1 2	Lower Mortality Estimate - Hospital 30-Day			Memo	
Upper Mortality Estim		Death (Mortality) Rates from Pneumonia Upper Mortality Estimate - Hospital 30-Day			Memo	
Death (Mortality) Rate	•	Death (Mortality) Rates from Pneumonia			Wiemo	
	Hospital 30-Day Death	Number of Patients - Hospital 30-Day Death			Memo	
(Mortality) Rates from		(Mortality) Rates from Pneumonia			1/101110	
	D-Day Death (Mortality)	Footnote - Hospital 30-Day Death (Mortality)			Memo	
Rates from Pneumonia			from Pneumonia)		
Hospital 30-Day Read			tal 30-Day Readmission Rates fro	m Heart	Memo	
Heart Attack		Attacl	•			
Comparison to U.S. Rate - Hospital 30-Day			arison to U.S. Rate - Hospital 30-	Day	Memo	
Readmission Rates from Heart Attack		Readmission Rates from Heart Attack				
Lower Readmission Estimate - Hospital 30-		Lower Readmission Estimate - Hospital 30-Day			Memo	
Day Readmission Rates from Heart Attack			nission Rates from Heart Attack	•		
-	stimate - Hospital 30-Day	Upper Readmission Estimate - Hospital 30-Day			Memo	
Readmission Rates fro		Readmission Rates from Heart Attack				
Number of Patients - I	Hospital 30-Day	Numb	er of Patients - Hospital 30-Day		Memo	
Readmission Rates fro			nission Rates from Heart Attack			

Table Name (Back to Table Listing)	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	File Outcome of Care Measur	·p	Hospital Outcome Of Care 30-D		Iortality and
	Outcome of Care Weasur	C	Measures		ion Hospital Results
Description	30-Day Mortality and Re	admissi	ion measures hospital-level results		ion Hospital Results
CSV Revised File Co	· · · ·		Medicare.gov Column Name		DDB Data Type
Footnote - Hospital 30)-Day Readmission Rates		ote - Hospital 30-Day Readmission	n Rates	Memo
from Heart Attack	•	from 1	Heart Attack		
Hospital 30-Day Read	mission Rates from	Hospi	tal 30-Day Readmission Rates fro	m Heart	Memo
Heart Failure		Failur	re		
Comparison to U.S. R	ate - Hospital 30-Day	Comp	arison to U.S. Rate - Hospital 30-	Day	Memo
Readmission Rates from	om Heart Failure		mission Rates from Heart Failure		
Lower Readmission E	stimate - Hospital 30-		r Readmission Estimate - Hospital	30-Day	Memo
Day Readmission Rate	es from Heart Failure	Readr	mission Rates from Heart Failure		
	stimate - Hospital 30-Day	Upper Readmission Estimate - Hospital 30-Day			Memo
Readmission Rates from		Readmission Rates from Heart Failure			
Number of Patients - I			per of Patients - Hospital 30-Day		Memo
Readmission Rates fro		Readmission Rates from Heart Failure			
•)-Day Readmission Rates	Footnote - Hospital 30-Day Readmission Rates			Memo
from Heart Failure		from Heart Failure			
Hospital 30-Day Read	mission Rates from	Hospital 30-Day Readmission Rates from			Memo
Pneumonia		Pneumonia			
Comparison to U.S. R		Comparison to U.S. Rate - Hospital 30-Day			Memo
Readmission Rates from		Readmission Rates from Pneumonia			
Lower Readmission E	•		r Readmission Estimate - Hospital	l 30-Day	Memo
Day Readmission Rate			mission Rates from Pneumonia		
	stimate - Hospital 30-Day		Readmission Estimate - Hospital	30-Day	Memo
Readmission Rates from Pneumonia		Readmission Rates from Pneumonia			
Number of Patients - Hospital 30-Day		Number of Patients - Hospital 30-Day			Memo
Readmission Rates from Pneumonia		Readmission Rates from Pneumonia			
Footnote - Hospital 30-Day Readmission Rates		Footnote - Hospital 30-Day Readmission Rates			Memo
from Pneumonia			Pneumonia		7.6
		Locat	ion		Memo

Table Name	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Outcome of Care Measur	es -	Hospital Outcome Of Care	30-Day Mo	ortality and
	State		Measures - State	Readmissi	on State Results
Description	30-Day Mortality and Re	admiss	ion measures state-level results		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
State		State			Text(2)
Number of Hospitals v	whose 30-day Death	Hospital 30-Day Death (Mortality) Rates from		Memo	
(Mortality) Rates from	Heart Attack are Better	Heart Attack - Better than U.S. National Rate		l Rate	
than U.S. National Rat	te				
Number of Hospitals whose 30-Day Death		Hospital 30-Day Death (Mortality) Rates from		es from	Memo
(Mortality) Rates from Heart Attack are No		Heart Attack - No different than U.S. National		ational	
different than U.S. Na	tional Rate	Rate			

Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business	
(Buck to Tubic Listing)	Outcome of Care Measur	es -	Hospital Outcome Of Care		ortality and
	State		Measures - State	Readmissi	on State Results
Description			on measures state-level results		
CSV Revised File Co			Medicare.gov Column Name		DDB Data Type
Number of Hospitals v			tal 30-Day Death (Mortality) Rate		Memo
	Heart Attack are Worse	Heart	Attack - Worse than U.S. Nationa	ıl Rate	
than U.S. National Rat					
Number of Hospitals v	——————————————————————————————————————		tal 30-Day Death (Mortality) Rate		Memo
(Mortality) Rates from		Heart	Attack - Number of Cases Too Sr	nall	
Number of Cases Too					
Number of Hospitals v			tal 30-Day Death (Mortality) Rate		Memo
	Heart Failure are Better	Heart	Failure - Better than U.S. Nationa	ıl Rate	
than U.S. National Rat					
Number of Hospitals v			tal 30-Day Death (Mortality) Rate		Memo
(Mortality) Rates from			Failure - No different than U.S. N	lational	
different than U.S. Na		Rate			
Number of Hospitals v	——————————————————————————————————————		tal 30-Day Death (Mortality) Rate		Memo
	Heart Failure are Worse	Heart	Failure - Worse than U.S. Nationa	al Rate	
than U.S. National Rat					
Number of Hospitals v			tal 30-Day Death (Mortality) Rate		Memo
(Mortality) Rates from		Heart Failure - Number of Cases Too Small			
Number of Cases Too			100 5 5 1 01 11 15		
Number of Hospitals v		•	tal 30-Day Death (Mortality) Rate		Memo
	Pneumonia are Better	Pneumonia - Better than U.S. National Rate			
than U.S. National Rat		W. S. 100 P. D. d. Of a Branch			
Number of Hospitals v		Hospital 30-Day Death (Mortality) Rates from			Memo
(Mortality) Rates from		Pneun	nonia - No different than U.S. Nat	ional Rate	
different than U.S. Na		** .	120 D. D. 1 (1/11) D.		
Number of Hospitals v	——————————————————————————————————————	•	tal 30-Day Death (Mortality) Rate		Memo
	Pneumonia are Worse	Pneumonia - Worse than U.S. National Rate			
than U.S. National Rat		11.	(-1.20 D D(1.04 (1.12) D		Mana
Number of Hospitals v		Hospital 30-Day Death (Mortality) Rates from Pneumonia - Number of Cases Too Small			Memo
of Cases Too Small	Pneumonia are Number	rneun	noma - Number of Cases 100 Sm	111	
	whose 20 day	Llogni	tal 20 Day Readmission Rates fro	m Uoort	Memo
Number of Hospitals v Readmission Rates from			tal 30-Day Readmission Rates fro c - Better than U.S. National Rate	ш пеап	Memo
Better than U.S. Natio		Attaci	k - Better than U.S. National Rate		
Number of Hospitals v		Hogni	tal 30 Day Readmission Dates from	m Haart	Memo
	om Heart Attack are No				
different than U.S. Na		Allaci	x - 140 different man O.S. Ivadolla	1 Nate	
		Hoeni	tal 30-Day Readmission Rates fro	m Heart	Memo
Number of Hospitals whose 30-Day Readmission Rates from Heart Attack are		_	α - Worse than U.S. National Rate		14101110
Worse than U.S. National Rate		Attaci	x - worse man o.s. manonal Rate		
Number of Hospitals v		Ності	tal 30-Day Readmission Rates fro	m Heart	Memo
Readmission Rates from			ιαι 30-Day Readmission Rates 110 κ - Number of Cases Too Small	m mall	IVICIIIO
Number of Cases Too		Attaci	x - runnoct of Cases 100 Sillan		
Tailloci of Cases 100	DIIIMII	<u> </u>			

Table Name	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File Outcome of Care Measur	200	Hospital Outcome Of Cara	20 Doy M	ortality and
		es -	Hospital Outcome Of Care Measures - State		ortality and on State Results
D ' 4'	State	. 4		Readmissi	on State Results
Description			on measures state-level results		
CSV Revised File Co			Medicare.gov Column Name	**	DDB Data Type
Number of Hospitals v			tal 30-Day Readmission Rates fro		Memo
Readmission Rates from		Failur	e - Better than U.S. National Rate		
Better than U.S. Natio					
Number of Hospitals v	•		tal 30-Day Readmission Rates fro		Memo
	om Heart Failure are No	Failur	e - No different than U.S. Nationa	l Rate	
different than U.S. Na	tional Rate				
Number of Hospitals v			tal 30-Day Readmission Rates fro		Memo
Readmission Rates fro	om Heart Failure are	Failure - Worse than U.S. National Rate			
Worse than U.S. Natio	onal Rate				
Number of Hospitals v	whose 30-Day	Hospital 30-Day Readmission Rates from Heart			Memo
Readmission Rates fro	om Heart Failure are	Failure - Number of Cases Too Small			
Number of Cases Too	Small				
Number of Hospitals v	whose 30-Day	Hospital 30-Day Readmission Rates from			Memo
	om Pneumonia are Better	Pneumonia - Better than U.S. National Rate			
than U.S. National Rat	te				
Number of Hospitals v	whose 30-Day	Hospital 30-Day Readmission Rates from		Memo	
Readmission Rates from		Pneumonia - No different than U.S. National Rate			
different than U.S. Na					
	Number of Hospitals whose 30-Day		Hospital 30-Day Readmission Rates from		Memo
Readmission Rates from Pneumonia are Worse		Pneumonia - Worse than U.S. National Rate			
than U.S. National Rate		1 110 011			
Number of Hospitals whose 30-Day		Hospital 30-Day Readmission Rates from			Memo
Readmission Rates from	•	•	nonia - Number of Cases Too Sma		1.121110
Number of Cases Too		1 mean		***	
Trained of Cases 100	DIIIMII				

Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business		
\			Hospital Outcome Of Care	30-Day Mortality and		
	National		Measures - National Average	Readmission National Results		
Description	30-Day Mortality and Re	30-Day Mortality and Readmission measures national results				
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type	
Condition		Condition			Text(13)	
Measure Name N		Measure Name			Memo	
National Mortality/Rea	admission Rate	National Mortality/Readmission Rate			Text(50)	

Table Name (Back to Table Listing)	Physical: Revised CSV l File	Flat	Physical: Data.Medicare.gov	Business	
	Outpatient Imaging Efficiency		Use Of Medical Imaging	Outpatient	Imaging Efficiency
			Measures	Hospital Results	
Description	Outpatient Imaging Effici	iency n	neasures hospital-level results		
CSV Revised File Column Name		Data.Medicare.gov Column Name			DDB Data Type
Provider Number		Provider Number			Memo

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Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business		
	Outpatient Imaging Effic Measures		Measures Hospital R		Imaging Efficiency Results	
Description	Outpatient Imaging Effic	iency n	neasures hospital-level results			
CSV Revised File Co			Medicare.gov Column Name		DDB Data Type	
Hospital Name		Hospi	tal Name		Memo	
Address 1		Addre	ess 1		Memo	
Address 2		Addre	ess 2		Memo	
Address 3		Addre	ess 3		Memo	
City		City			Memo	
State		State			Text(2)	
ZIP Code		ZIP C	ode		Text(5)	
County Name		Count	y Name		Text(25)	
Phone Number		Phone	Number		Text(10)	
Outpatients with low b	back pain who had an	Outpa	tients with low back pain who had	l an MRI	Memo	
MRI without trying red	commended treatments	witho	ut trying recommended treatments	first, such		
first such as physical t	herapy	as phy	vsical therapy.			
Number of Patients 1		Number of Patients			Memo	
Footnote 1		Footnote			Memo	
Outpatients who had a	follow-up mammogram	Outpa	tients who had a follow-up mamn	nogram or	Memo	
or ultrasound within 4:	5 days after a screening	ultrasound within 45 days after a screening				
mammogram			nogram.			
Number of Patients 2		Number of Patients Who Had a Follow-up			Memo	
Footnote 2		Footnote (2)			Memo	
	f the abdomen that were	Outpatient CT scans of the abdomen that were			Memo	
"combination" (double	e) scans	"combination" (double) scans.				
Number of Patients 3		Number of Patients Who Had Combination Scans			Memo	
Footnote 3		Footnote (3)			Memo	
Outpatient CT scans o		Outpatient CT scans of the chest that were			Memo	
"combination" (double	e) scans	"combination" (double) scans.				
Number of Patients 4			per of Outpatients Who Had Comb	ination	Memo	
			Scans			
Footnote 4		Footnote (4)		Memo		
Outpatients who got ca		•	tients who got cardiac imaging str	ess tests	Memo	
tests before low-risk outpatient surgery			e low-risk outpatient surgery			
Number of Patients 5		Number of Patients 5			Memo	
Footnote 5		Footnote (5)			Memo	
Outpatients with brain CT scans who got a		Outpatients with brain CT scans who got a sinus			Memo	
sinus CT scan at the sa	ame time	CT scan at the same time			34	
Number of Patients 6		Number of Patients 6			Memo	
Footnote 6		Footn	ote (6)		Memo	

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Table Name	Physical: Revised CSV Flat		Physical: Data.Medicare.gov	Business		
(<u>Back to Table Listing</u>)	File					
	Outpatient Imaging Effic	iency	Use Of Medical Imaging -	Outpatient	Imaging Efficiency	
	Measures - State		State	State Resu	lts	
Description	Outpatient Imaging Effic	iency n	neasures state-level results			
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type	
State		State			Text(50)	
Outpatients with low b	pack pain who had an	Outpa	tients with low back pain who had	l an MRI	Memo	
MRI without trying re-	commended treatments	witho	ut trying recommended treatments	first such		
first such as physical t	first such as physical therapy		ysical therapy.			
Outpatients who had a	follow-up mammogram	Outpatients who had a follow-up mammogram or			Memo	
or ultrasound within 4	5 days after a screening	ultrasound within 45 days after a screening				
mammogram		mammogram.				
•	f the abdomen that were	Outpatient CT scans of the abdomen that were			Memo	
"combination" (double	e) scans	"combination" (double) scans.				
Outpatient CT scans o		Outpatient CT scans of the chest that were			Memo	
"combination" (double	e) scans	"combination" (double) scans.				
Outpatients who got cardiac imaging stress		Outpatients who got cardiac imaging stress tests			Memo	
	, Ü		before low-risk outpatient surgery.			
Outpatients with brain		Outpatients with brain CT scans who got a sinus			Memo	
sinus CT scan at the sa	ame time	CT sc	an at the same time.			

Table Name	Physical: Revised CSV I	Flat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Outpatient Imaging Efficiency		Use Of Medical Imaging -	Outpatient Imaging Efficiency	
	Measures - National		National	National Results	
Description	Outpatient Imaging Effici	ency n	neasures national results		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Measure Name		Measure Name			Memo
Score		Score			Text(50)

Table Name			Physical: Data.Medicare.gov	Business
(<u>Back to Table Listing</u>)	File			
	Process of Care Measure	s -	Hospital Process of Care	Process of Care—Children's
	Children		Measures - Children's Asthma	Asthma Care Hospital Results
Description	Process of Care—Childre	en's As	thma Care measures hospital-leve	l results
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name	DDB Data Type
Provider Number		Provi	der Number	Memo
Hospital Name			ital Name	Memo
Address 1	A		ess 1	Memo
Address 2		Addre	ess 2	Memo
Address 3		Address 3		Memo
City		City		Memo
State		State		Text(2)
ZIP Code	ZIP		Code	Text(5)
County Name		Coun	ty Name	Text(25)
Phone Number		Phone	e Number	Text(10)

Table Name	Physical: Revised CSV Flat		Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Process of Care Measure	s -	Hospital Process of Care	Process of	Care—Children's
	Children		Measures - Children's Asthma	Asthma Ca	re Hospital Results
Description	Process of Care—Childre	en's As	thma Care measures hospital-level	l results	
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Percent of Children W	ho Received Reliever	Perce	nt of Children Who Received Reli	ever	Memo
Medication While Hos	spitalized for Asthma	Medic	cation While Hospitalized for Asth	nma	
Number of Patients 1		Numb	per of Patients		Memo
Footnote 1		Footnote			Memo
Percent of Children W	Tho Received Systemic	Percent of Children Who Received Systemic			Memo
Corticosteroid Medica	tion While Hospitalized	Corticosteroid Medication While Hospitalized for			
for Asthma		Asthma			
Number of Patients 2		Number of Patients-2			Memo
Footnote 2		Footnote-2		Memo	
Percent of Children an	d their Caregivers Who	Percent of Children and their Caregivers Who		s Who	Memo
Received a Home Management Plan of Care		Received a Home Management Plan of Care			
Document While Hospitalized for Asthma Do		Docu	ment While Hospitalized for Asth		
Number of Patients 3		Number of Patients-3			Memo
Footnote 3		Footn	ote-3		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business	
	Process of Care Measure	s –	Hospital Process of Care	Process of	Care—Heart Attack
	Heart Attack		Measures - Heart Attack	Hospital R	esults
Description	Process of Care—Heart		neasures hospital-level results		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Provider Number		Provid	der Number		Memo
Hospital Name		Hospi	tal Name		Memo
Address 1		Addre	ess 1		Memo
Address 2		Addre	ess 2		Memo
Address 3		Addre	ess 3		Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP C	ode		Text(5)
County Name		Count	y Name		Text(25)
Phone Number		Phone	Number		Text(10)
	k Patients Given Aspirin		nt of Heart Attack Patients Given	Aspirin at	Memo
at Discharge Number of Patients 2		Disch	arge per of Patients-2		Mana
					Memo
Footnote 2	1 D (' (C'	Footn			Memo
Percent of Heart Attac			nt of Heart Attack Patients Given	-4 Of	Memo
•	on Within 30 Minutes Of		olytic Medication Within 30 Min	ites Of	
Arrival Number of Patients 6		Arriva	per of Patients-6		Memo
		Footn			Memo
Footnote 6 Percent of Heart Attac	le Detiente Civen DCI		ote-o nt of Heart Attack Patients Given	DCI	
Within 90 Minutes Of			nt of Heart Attack Patients Given . n 90 Minutes Of Arrival	rCI	Memo
Number of Patients 7			per of Patients-7		Memo

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Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business	
	Process of Care Measures	s –	Hospital Process of Care	Process of	Care—Heart Attack
	Heart Attack		Measures - Heart Attack	Hospital R	lesults
Description	Process of Care—Heart A	Attack 1	neasures hospital-level results		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Footnote 7		Footn	ote-7		Memo
Average number of m	inutes before outpatients	Avera	age number of minutes before outp	atients	Memo
with chest pain or pos	sible heart attack got an	with o	chest pain or possible heart attack	got an	
ECG		ECG			
Number of Patients 8		Numb	per of Patients 8		Memo
Footnote 8		Footn	ote 8		Memo
Average number of m	inutes before outpatients	Avera	age number of minutes before outp	atients	Memo
with chest pain or pos	sible heart attack were	with o	chest pain or possible heart attack	were	
transferred to another	hospital	transf	erred to another hospital		
Number of Patients 9		Number of Patients 9			Memo
Footnote 9	Footnote 9		ote 9		Memo
	pain or possible heart	Outpatients with chest pain or possible heart			Memo
attack who got aspirin	within 24 hours of	attack who got aspirin within 24 hours of arrival			
arrival					
Number of Patients 11		Number of Patients-11			Memo
Footnote 11		Footnote-11			Memo
	pain or possible heart	Outpatients with chest pain or possible heart			Memo
	o break up blood clots	attack who got drugs to break up blood clots			
within 30 minutes of a		within 30 minutes of arrival			
Number of Patients 12	2		per of Patients-12		Memo
Footnote 12			ote-12		Memo
	Given a Prescription for a		Attack Patients Given a Prescript	ion for a	Memo
Statin at Discharge			at Discharge		
Number of Patients 13		Number of Patients-13			Memo
Footnote 13		Footnote-13			Memo
Median Time to Fibrir	•	Median Time to Fibrinolysis			Memo
Number of Patients 10)	Number of Patients 10			Memo
Footnote 10		Footn	ote 10		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business	
	Process of Care Measures	s –	Hospital Process of Care	Process of	Care—Heart
	Heart Failure		Measures - Heart Failure	Failure Ho	spital Results
Description	Process of Care—Heart F	ailure :	measures hospital-level results		
CSV Revised File Column Name		Data.	Data.Medicare.gov Column Name		DDB Data Type
Provider Number	Provider Number		Provider Number		Memo
Hospital Name		Hospital Name			Memo
Address 1		Address 1			Memo
Address 2		Addre	Address 2		Memo
Address 3		Addre	Address 3		Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIPC	Code		Text(5)

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Table Name (Back to Table Listing)	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business	
	Process of Care Measure	s –	Hospital Process of Care	Process of	Care—Heart
	Heart Failure		Measures - Heart Failure	Failure Ho	spital Results
Description	Process of Care—Heart I	Failure 1	measures hospital-level results		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
County Name		Count	ty Name		Text(25)
Phone Number		Phone	Number		Text(10)
Percent of Heart Failu	re Patients Given an	Perce	nt of patients who were given an e	valuation	Memo
Evaluation of Left Ver	Evaluation of Left Ventricular Systolic (LVS)		ft Ventricular Systolic Dysfunction	n (LVSD)	
Function					
Number of Patients 1		Number of Patients			Memo
Footnote 1		Footnote			Memo
Percent of Heart Failu	re Patients Given ACE	Percent of Heart Failure Patients Given ACE			Memo
Inhibitor or ARB for I	Left Ventricular Systolic	Inhibitor or ARB for Left Ventricular Systolic			
Dysfunction (LVSD)		Dysfunction (LVSD)			
Number of Patients 2		Number of Patients-2			Memo
Footnote 2		Footn	ote-2		Memo
Percent of Heart Failure Patients Given		Percent of Heart Failure Patients Given Discharge			Memo
Discharge Instructions		Instructions			
Number of Patients 3		Numb	Number of Patients-3		Memo
Footnote 3		Footn	Footnote-3		Memo

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Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business	
(Buck to Tuote Bisting)	Process of Care Measure	s –	Hospital Process of Care	Process of	Care—Pneumonia
	Pneumonia		Measures - Pneumonia	Hospital R	lesults
Description	Process of Care—Pneum	onia m	easures hospital-level results	L	
CSV Revised File Co			Medicare.gov Column Name		DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name		Hospi	ital Name		Memo
Address 1		Addre	ess 1		Memo
Address 2		Addre	ess 2		Memo
Address 3		Addre	ess 3		Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP C	Code		Text(5)
County Name		Coun	ty Name		Text(25)
Phone Number		Phone	e Number		Text(10)
Percent of Pneumonia	Patients Whose Initial	Percent of Pneumonia Patients Whose Initial ER		Memo	
ER Blood Culture Wa	s Performed Prior To	Blood Culture Was Performed Prior To			
Administration Of Fire	st Dose Of Antibiotics	Administration Of First Dose Of Antibiotics		otics	
Number of Patients 2		Numb	per of Patients 2		Memo
Footnote 2		Footn			Memo
Percent of Pneumonia Patients Given the Most		Percent of Pneumonia Patients Given the Most		ne Most	Memo
Appropriate Initial Antibiotic(s)		Appropriate Initial Antibiotic(s)			
Number of Patients 4		Numb	per of Patients 4		Memo
Footnote 4		Footn	note 4	Memo	

Table Name	Physical: Revised CSV Flat		Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Process of Care Measure	Process of Care Measures –		Process of	Care—Surgical
	SCIP		Measures - Surgical Care	Care Impro	ovement Project
			Improvement Project	Hospital R	esults
Description	Process of Care—Surgica	al Care	Improvement Project measures ho	ospital-level	results
CSV Revised File Co	lumn Name		Medicare.gov Column Name		DDB Data Type
Provider Number		Provid	der Number		Memo
Hospital Name		Hospi	ital Name		Memo
Address 1		Addre	ess 1		Memo
Address 2		Address 2			Memo
Address 3		Address 3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County Name		County Name		Text(25)	
Phone Number		Phone Number		Text(10)	
Surgery patients who	were given an antibiotic	Perce	nt of Surgery Patients given an an	tibiotic at	Memo
at the right time (within one hour before		the right time (within one hour before surgery) to			
surgery) to help prevent infection		help prevent infection			
Number of Patients 1		Number of Patients-1			Memo
Footnote 1		Footn	Footnote-1		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business	
	Process of Care Measure	s –	Hospital Process of Care	Process of	Care—Surgical
	SCIP		Measures - Surgical Care	ovement Project	
			Improvement Project	Hospital R	
Description			Improvement Project measures ho	spital-level	
CSV Revised File Col			Medicare.gov Column Name		DDB Data Type
	e preventive antibiotics		nt of Surgery Patients whose preven		Memo
	ght time (within 24 hours		otics were stopped at the right time	e (within	
after surgery)			urs after surgery)		
Number of Patients 2			er of Patients-2		Memo
Footnote 2		Footn			Memo
	were given the right kind		nt of Surgery Patients who were gi		Memo
of antibiotic to help pr	event infection		kind of antibiotic to help prevent in	ntection	
Number of Patients 3			er of Patients-3		Memo
Footnote 3		Footn			Memo
Patients who got treatr			nt of Surgery Patients who got trea		Memo
	e or after their surgery)		ime (within 24 hours before or aft	er	
to help prevent blood of Number of Patients 4	CIOUS		ry) to help prevent blood clot per of Patients-4		Marra
Footnote 4					Memo Memo
	a da atama andama d	Footnote-4			Memo
Surgery patients whose	blood clots after certain	Percent of Surgery Patients whose doctors ordered treatments to prevent blood clots after certain			Memo
types of surgeries	flood clots after certain		of surgeries	Citani	
Number of Patients 5			per of Patients-5		Memo
Footnote 5		Footn			Memo
Heart surgery patients	whose blood sugar		nt of all Heart Surgery Patients wh	ose blood	Memo
	t under good control in	sugar is kept under good control in the days right			1,10mo
the days right after sur		after surgery			
Number of Patients 6	87	Number of Patients-6			Memo
Footnote 6		Footn			Memo
The percent of surgery	patients whose urinary	Percei	nt of Surgery Patients whose urina	ry	Memo
	d on the first or second	catheters were removed on the first or second day			
day after surgery		after s	urgery	•	
Number of Patients 11		Number of Patients 11			Memo
Footnote 11		Footnote 11			Memo
	were taking heart drugs		ry patients who were taking heart		Memo
called beta blockers be	e		beta blockers before coming to the	e hospital	
hospital who were kep	t on them		vere kept on them		
Number of Patients 8			er of Patients 8		Memo
Footnote 8		Footn			Memo
Outpatients having surgery who got an		Outpatients having surgery who got an antibiotic			Memo
antibiotic at the right time - within one hour		at the right time - within one hour before surgery			
before surgery (higher numbers are better)		(higher numbers are better)			
Number of Patients 9		Number of Patients 9			Memo
Footnote 9	1	Footnote 9			Memo
_	gery who got the right	Outpatients having surgery who got the right kind			Memo
kind of antibiotic (high			ibiotic (higher numbers are better)		Manage
Number of Patients 10		Numb	er of Patients 10		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business		
,	Process of Care Measure	s –	Hospital Process of Care	Process of	Care—Surgical	
			Measures - Surgical Care		ovement Project	
			Improvement Project	Hospital R	esults	
Description	Process of Care—Surgica	cal Care Improvement Project measures hospital-level results				
CSV Revised File Column Name D		Data.	Medicare.gov Column Name		DDB Data Type	
Footnote 10		Footnote 10			Memo	
Patients having surger	y who were actively	Patier	nts having surgery who were active	ely	Memo	
warmed in the operation	ng room or whose body	warm	ed in the operating room or whose	body		
temperature was near normal temp		tempe	erature was near normal			
Number of Patients 13 Number of Patients 13		Numb	per of Patients 13		Memo	
Footnote 13		Footn	ote 13		Memo	

Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business		
	Process of Care Measure	s –	 Hospital Process of Care Process of 		of Care State Results	
	State		Measures - State Average			
Description	Process of Care measures	s state-l	evel results			
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type	
State		State			Text(2)	
Percent of Heart Attac	k Patients Given Aspirin	Percei	nt of Heart Attack Patients Given	Aspirin at	Memo	
at Discharge		Disch	arge	_		
Percent of Heart Attac	k Patients Given	Perce	nt of Heart Attack Patients Given		Memo	
Fibrinolytic Medicatio	on Within 30 Minutes Of	Fibrin	olytic Medication Within 30 Minu	utes Of		
Arrival		Arriva	al			
Percent of Heart Attac	k Patients Given PCI	Perce	nt of Heart Attack Patients Given	PCI	Memo	
Within 90 Minutes Of	Arrival	Withi	n 90 Minutes Of Arrival			
Percent of Heart Failur	re Patients Given an	Perce	nt of Heart Failure Patients Given	an	Memo	
Evaluation of Left Ver	ntricular Systolic (LVS)	Evaluation of Left Ventricular Systolic (LVS)				
Function		Funct				
Percent of Heart Failur	re Patients Given ACE	Perce	nt of Heart Failure Patients Given	ACE	Memo	
Inhibitor or ARB for I	Left Ventricular Systolic	Inhibitor or ARB for Left Ventricular Systolic				
Dysfunction (LVSD)		Dysfunction (LVSD)				
Percent of Heart Failu	re Patients Given	Percent of Heart Failure Patients Given Discharge			Memo	
Discharge Instructions		Instructions				
Percent of Pneumonia	Patients Whose Initial	Percent of Pneumonia Patients Whose Initial ER			Memo	
ER Blood Culture Was	s Performed Prior To	Blood Culture Was Performed Prior To				
Administration Of Firs	st Dose Of Antibiotics	Administration Of First Dose Of Antibiotics				
Percent of Pneumonia	Patients Given the Most	Perce	nt of Pneumonia Patients Given th	e Most	Memo	
Appropriate Initial An	tibiotic(s)	Appropriate Initial Antibiotic(s)				
Surgery patients who	were given an antibiotic	Surge	ry patients who were given an ant	ibiotic at	Memo	
at the right time (withi	at the right time (within one hour before		ght time (within one hour before s			
surgery) to help preven		_ ^ ^	prevent infection			
Surgery patients whose preventive antibiotics		Surgery patients whose preventive antibiotics			Memo	
were stopped at the right time (within 24 hours		were stopped at the right time (within 24 hours				
after surgery)			surgery)			
Surgery patients who were given the right kind			ry patients who were given the rig	tht kind of	Memo	
of antibiotic to help pr	event infection	antibi	otic to help prevent infection			

Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business	
(Buck to Tuote Eisting)	Process of Care Measures	s —	Hospital Process of Care	Process of	Care State Results
	State State	,	Measures - State Average	1100035 01	care state results
Description	Process of Care measures	state-le			
CSV Revised File Co			Medicare.gov Column Name		DDB Data Type
Patients who got treats			ats who got treatment at the right t	ime	Memo
	e or after their surgery)		n 24 hours before or after their su		
to help prevent blood	clots		prevent blood clots		
Surgery patients whos		Surge	ry patients whose doctors ordered	treatments	Memo
treatments to prevent b	blood clots after certain	to pre	vent blood clots after certain types	s of	
types of surgeries		surger	ries		
Heart surgery patients	whose blood sugar	Heart	surgery patients whose blood suga	ar (blood	Memo
(blood glucose) is kep	t under good control in	glucos	se) is kept under good control in tl	ne days	
the days right after sur	gery		after surgery		
	patients whose urinary		ercent of surgery patients whose u		Memo
	d on the first or second		ers were removed on the first or se	econd day	
day after surgery			surgery		
	were taking heart drugs		ry patients who were taking heart		Memo
called beta blockers be			beta blockers before coming to the	ne hospital	
hospital, who were key			vere kept on them		
Percent of Children W			nt of Children Who Received Reli		Memo
Medication While Hos		Medication While Hospitalized for Asthma			
	Tho Received Systemic	Percent of Children Who Received Systemic		Memo	
	tion While Hospitalized	Corticosteroid Medication While Hospitalized for			
for Asthma	14 ' 0 ' W	Asthma			3.4
	d their Caregivers Who	Percent of Children and their Caregivers Who		Memo	
Received a Home Man		Received a Home Management Plan of Care			
Document While Hosp		Document While Hospitalized for Asthma Outpatients having surgery who got an antibiotic			Memo
Outpatients having sur antibiotic at the right t		at the right time - within one hour before surgery		Memo	
before surgery (higher		(higher numbers are better)			
	gery who got the right		tients having surgery who got the	right kind	Memo
	ner numbers are better)	of antibiotic (higher numbers are better)		Wichio	
	inutes before outpatients	Average number of minutes before outpatients		Memo	
_	sible heart attack got an	with chest pain or possible heart attack got an			
ECG	5	ECG			
	inutes before outpatients	Average number of minutes before outpatients		Memo	
with chest pain or possible heart attack were		with chest pain or possible heart attack were			
transferred to another hospital		transferred to another hospital			
Median Time to Fibrinolysis		Median Time to Fibrinolysis		Memo	
Outpatients with chest pain or possible heart		Outpatients with chest pain or possible heart		Memo	
	attack who got aspirin within 24 hours of		who got aspirin within 24 hours of	of arrival	
arrival					
Outpatients with chest pain or possible heart		Outpatients with chest pain or possible heart			Memo
	attack who got drugs to break up blood clots		attack who got drugs to break up blood clots		
within 30 minutes of a		within 30 minutes of arrival			
	Given a Prescription for a		Attack Patients Given a Prescripti	ion for a	Memo
Statin at Discharge		Statın	at Discharge		

Table Name	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Process of Care Measures –		Hospital Process of Care	Process of Care State Results	
	State		Measures - State Average		
Description	Process of Care measures state-		evel results		
CSV Revised File Column Name		Data.	Medicare.gov Column Name		DDB Data Type
Patients having surgery who were actively warmed in the operating room or whose body		warm	ats having surgery who were active ed in the operating room or whose		Memo
temperature was near i	normal	tempe	rature was near normal		

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Table Name	Physical: Revised CSV F	lat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Process of Care Measures –		Hospital Process of Care	Process of Care National	
	National		Measures - National Average	Results	
Description	Process of Care measures nation		al results		
CSV Revised File Column Name Da		Data.	Medicare.gov Column Name		DDB Data Type
Measure name		Measi	ure name		Memo
Condition		Condi	ition		Memo
Category		ory		Memo	
National Process of Ca	are Rate	Natio	nal Process of Care Rate		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV F File	lat	Physical: Data.Medicare.gov	Business	
	READMISSION_REDUC	CTIO	Hospital Readmission	Readmission	on Reduction
	N		Reduction	Hospital R	esults
Description	Readmission Reduction m	easure	es hospital-level results		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Hospital Name		Hospi	tal Name		Memo
Provider Number		Provio	ider Number		Memo
State	te State				Text(2)
Measure Name	Measure Name N		Measure Name		Memo
Number of Discharges	Number of Discharges N		per of Discharges		Memo
Footnote F		Footn	ote		Memo
Excess Readmission R	Ratio	Excess Readmission Ratio			Memo
Predicted Readmission Rate		Predicted Readmission Rate			Memo
Expected Readmission Rate		Expected Readmission Rate			Memo
Number of Readmissions		Number of Readmissions			Memo
Start Date		Start Date			Memo
End Date		End D	End Date		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV File	Flat	Physical: Data.Medicare.gov	Business	
	Structural Measures		Hospital Structural Measures - Cardiac Surgery Registry	Structural Hospital Results	
Description	Structural measures hosp	ital-lev	el results		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name	Hospital Name		Hospital Name		Memo
Address 1	ldress 1		Address 1		Memo
Address 2			Address 2		Memo
Address 3	Address 3		ess 3		Memo
City	City				Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County Name		County Name			Text(25)
Phone Number F		Phone Number			Text(10)
Measure Name		Measure Name			Memo
Measure Response		Measure Response			Memo

Table Name	Physical: Revised CSV	Flat	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	File				
	Measure Crosswalk			Measure C	rosswalk
Description	Hospital Compare measu	re cros	swalk		
CSV Revised File Co	lumn Name	Data.	Medicare.gov Column Name		DDB Data Type
Provider Number					Memo
Hospital Name					Memo
State					Text(2)
Condition					Memo
Measure Code					Memo
Measure Name					Memo
Score					Memo
Sample					Memo
Footnote					Memo

Table Name (Back to Table Listing)	Physical: Revised CSV I	Flat	Physical: Data.Medicare.gov	Business	
(<u>Suck to Yuote Zisting</u>)	THE		Hospital Compare - CASPER/ASPEN Contacts	Hospital C	ompare - ASEN Contacts
Description	Hospital Compare measu	re cros	swalk		
CSV Revised File Column Name		Data.	Medicare.gov Column Name		DDB Data Type
		State			Memo
Com		Comp	oare Tool		Memo
E-mai		il Address		Memo	
		Phone			Memo

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Appendix A - Hospital Compare Measures

Timely and Effective Care

Acute Myocardial Infarction

Measure ID	Measure Description
AMI–2	Heart Attack Patients Given Aspirin at Discharge
AMI–7a	Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival
AMI–8a	Heart Attack Patients Given PCI Within 90 Minutes Of Arrival
AMI-10	Heart Attack Patients Given a Prescription for a Statin at Discharge
OP-1	Median Time to Fibrinolysis
OP-2	Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival
OP-3b	Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital
OP-4	Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival
OP-5	Average number of minutes before outpatients with chest pain or possible heart attack got an ECG

Heart Failure

Measure ID	Measure Description
HF-1	Patients Given Discharge Instructions
HF-2	Patients Given An Evaluation of Left Ventricular Systolic (LVS) Function
HF-3	Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)

Pneumonia

Measure ID	Measure Description
PN-3b	Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to the
	Administration of the First Hospital Dose of Antibiotics
PN-6	Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)

Surgical Care Improvement

Measure ID	Measure Description
SCIP-Inf-1a	Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision
SCIP-Inf-2a	Percent of Surgery Patients who Received the Appropriate Preventative Antibiotic(s) for Their
	Surgery
SCIP-Inf-3a	Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery
SCIP-Inf-4	Heart surgery patients whose blood sugar (blood glucose) is kept under good control in the
	days right after surgery
SCIP-Inf-9	Surgery patients whose urinary catheter was removed on the first or second day after surgery.
SCIP-Inf-10	Patients having surgery who were actively warmed in the operating room or whose body
	temperature was near normal by the end of surgery.
SCIP-VTE-1	Surgery Patients Whose Doctors Ordered Treatments to Prevent Blood Clots (Venous
	Thromboembolism) For Certain Types of Surgeries
SCIP-VTE-2	Surgery Patients Who Received Treatment To Prevent Blood Clots Within 24 Hours Before or
	after Selected Surgeries to Prevent Blood Clots

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Measure ID	Measure Description
SCIP-Card-2	Percent of surgery patients who were taking heart drugs called beta blockers before coming to
	the hospital, who were kept on the beta blockers during the period just before and after their
	surgery
OP-6	Outpatients having surgery who got an antibiotic at the right time – within one hour before
	surgery
OP-7	Outpatients having surgery who got the right kind of antibiotic

Emergency Department

Measure ID	Measure Description
ED-1b	Average (median) time patients spent in the emergency department, before they were admitted
	to the hospital as an inpatient
ED-2b	Average (median) time patients spent in the emergency department, after the doctor decided to
	admit them as an inpatient before leaving the emergency department for their inpatient room
OP-18b	Average time patients spent in the emergency department before being sent home
OP-20	Average time patients spent in the emergency department before they were seen by a healthcare
	professional
OP-21	Average time patients who came to the emergency department with broken bones had to wait
	before receiving pain medication
OP-22	Percentage of patients who came to the emergency department with stroke symptoms who
	received brain scan results within 45 minutes of arrival.
OP-23	Percentage of patients who came to the emergency department with stroke symptoms who
	received brain scan results within 45 minutes of arrival

Preventative Care

Measure ID	Measure Description
IMM-1a	Pneumococcal Immunization
IMM-2	Influenza Immunization

Children's Asthma Care

Measure ID	Measure Description
CAC-1a	Percent of Children Who Received Reliever Medication While Hospitalized for Asthma
CAC-2a	Percent of Children Who Received Systemic Corticosteroid Medication (oral and IV Medication That Reduces Inflammation and Controls Symptoms) While Hospitalized for Asthma
CAC-3	Percent of Children and their Caregivers Who Received a Home Management plan of Care Document While Hospitalized for Asthma

Readmissions, Complications, and Deaths - 30-Day Mortality and Readmissions

Measure ID	Measure Description
MORT-30-AMI	Acute Myocardial Infarction 30–Day Mortality Rate
MORT-30-HF	Heart Failure 30–Day Mortality Rate
MORT-30-PN	Pneumonia 30–Day Mortality Rate
READM-30-AMI	Acute Myocardial Infarction 30–Day Readmission Rate
READM-30-HF	Heart Failure 30–Day Readmission Rate
READM-30-PN	Pneumonia 30–Day Readmission Rate

AHRQ Patient Safety Indicators (PSIs) and Inpatient Quality Indicators (IQIs)

Measure ID Measure Description
Wiedstie Description

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PSI-04	Death Among Surgical Patients with Serious, Treatable Complications
PSI-06	Iatrogenic Pneumothorax
PS-12	Post–Operative Pulmonary Embolism (PE) or Deep Vein Thrombosis (DVT)
PSI–14	Postoperative Wound Dehiscence
PSI–15	Accidental Puncture or Laceration
PSI-90	Complication/Patient Safety for Selected Indicators
IQI–11	Abdominal Aortic Aneurysm (AAA) Mortality Rate
IQI–19	Hip Fracture Mortality Rate
IQI–91	Mortality for Selected Medical Conditions

Hospital-Acquired Conditions (HACs)

Measure ID	Measure Description
HAC-1	Foreign Object Retained After Surgery
HAC-2	Air Embolism
HAC-3	Blood Incompatibility
HAC-4	Pressure Ulcer Stages III & IV
HAC-5	Falls and trauma (Includes Fracture, dislocation, intracranial injury, crushing injury, burn, other
	injuries)
HAC-6	Vascular catheter–associated infections
HAC-7	Catheter-associated urinary tract Infection (CAUTI)
HAC-8	Manifestations of Poor Glycemic Control

Healthcare-Associated Infections (HAIs)

Measure ID	Measure Description
HAI-1	Central-line associated bloodstream infection (CLABSI)
HAI-2	Catheter-associated urinary tract infection (CAUTI)
HAI-3	Surgical site infections from colon surgery (SSI: Colon)
HAI-4	Surgical site infections from abdominal hysterectomy (SSI: Hysterectomy)

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Outpatient Imaging Efficiency

Measure ID	Measure Description
OP-8	Outpatients with low back pain who had an MRI without trying recommended treatments first,
	such as physical therapy. (If a number is high, it may mean the facility is doing too many
	unnecessary MRIs for low back pain.)
OP-9	Outpatients who had a follow-up mammogram or ultrasound within 45 days after a screening
	mammogram. (A number that is much lower than 8% may mean there's not enough follow–up.
	A number much higher than 14% may mean there's too much unnecessary follow–up.)
OP-10	Outpatient CT scans of the abdomen that were "combination" (double) scans. (The range for
	this measure is 0 to 1. A number very close to 1 may mean that too many patients are being
	given a double scan when a single scan is all they need.)
OP-11	Outpatient CT scans of the chest that were "combination" (double) scans. (The range for this
	measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a
	double scan when a single scan is all they need.)
OP-13	Outpatients who got cardiac imaging stress tests before low–risk outpatient surgery.
OP-14	Outpatients with brain CT scans who got a sinus CT scan at the same time.

Structural Measures

Measure ID	Measure Description
SM_PART_CARD	Participation in a systematic database for cardiac surgery
SM_PART_STROKE	Participation in a systematic database for stroke care
SM_PART_NURSE	Participation in a systematic database for nursing sensitive care
ACS_REGISTRY	Participation in a multispecialty surgical registry
OP-12	The ability for providers with HIT to receive laboratory data electronically directly into their
	qualified/certified EHR system as discrete searchable data
OP-17	Tracking clinical results between visits

Number of Medicare Patients and Medicare Payment

	1 (4 min of 01 1/10 4 min of 0 min of 1/10 4 min of 1 min	
Measure Description		
	Number of Medicare patient discharges for selected MS–DRGs	
	Spending per hospital patient with Medicare: Medicare spending per beneficiary	

Hospital Readmissions Reduction Program

Measure Description	
Acute Myocardial I	infarction 30–Day Readmission Rate
Heart Failure 30–Day Readmission Rate	
Pneumonia 30–Day	Readmission Rate

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Hospital Value-Based Purchasing

Measure Description
HVBP Acute Myocardial Infarction Score
HVBP Healthcare Associated Infection Score
HVBP HCAHPS Score
HVBP Heart Failure Score
HVBP Pneumonia Score
HVBP Surgical Care Improvement Project Score
HVBP Clinical Process of Care Domain Score
HVBP Patient Experience of Care Domain
HVBP Total Performance Score

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Appendix B – HCAHPS Survey Question Listing

Composite Topics

- Nurse Communication (Questions 1, 2, 3)
- Doctor Communication (Questions 5, 6, 7)
- Responsiveness of Hospital Staff (Questions 4, 11)
- Pain Management (Questions 13, 14)
- Communication About Medicines (Questions 16, 17)
- Discharge Information (Questions 19, 20)

Individual Topics

- Cleanliness of Hospital Environment (Question 8)
- Quietness of Hospital Environment (Question 9)

Overall Ratings

- Overall Rating of Hospital (Question 21)
- Willingness to Recommend Hospital (Question 22)

#	Quartier
	Question
Q1	During this hospital stay how often did nurses treat you with courtesy and respect?
Q2	During this hospital stay how often did nurses listen carefully to you?
Q3	During this hospital stay how often did nurses explain things in a way you could understand?
Q4	During this hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it?
Q5	During this hospital stay, how often did doctors treat you with courtesy and respect?
Q6	During this hospital stay, how often did doctors listen carefully to you?
Q7	During this hospital stay, how often did doctors explain things in a way you could understand?
Q8	During this hospital stay, how often were your room and bathroom kept clean?
Q9	During this hospital stay, how often was the area around your room quiet at night?
Q10	During this hospital stay, did you need help from nurses or other hospital staff in getting to the bathroom or in using a bedpan?
Q11	How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?
Q12	During this hospital stay, did you need medicine for pain?
Q13	During this hospital stay, how often was your pain well controlled?
Q14	During this hospital stay, how often did the hospital staff do everything they could to help you with your pain?
Q15	During this hospital stay, were you given any medicine that you had not taken before?
Q16	Before giving you any new medicine how often did hospital staff tell you what the medicine was for?
Q17	Before giving you any new medicine how often did hospital staff describe possible side effects in a way you could understand?
Q18	After you left the hospital, did you go directly to your own home, to someone else's home, or to another health facility?
Q19	During this hospital stay, did doctors, nurses or other hospital staff talk with you about whether you would have the help you needed when you left the hospital?
Q20	During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the hospital?

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#	Question
Q21	Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay?
Q22	Would you recommend this hospital to your friends and family?
Q23	During this hospital stay, staff took my preferences and those of my family or caregiver into account in deciding what my health care needs would be when I left?
Q24	When I left the hospital, I had a good understanding of the things I was responsible for in managing my health.
Q25	When I left the hospital, I clearly understood the purpose for taking each of my medications.
Q26	During this hospital stay, were you admitted to this hospital through the Emergency Room?
Q27	In general, how would you rate your overall health?
Q28	In general, how would you rate your overall mental or emotional health?
Q29	What is the highest grade or level of school that you have completed?
Q30	Are you of Spanish, Hispanic or Latino origin or descent?
Q31	What is your race? Please choose one or more.
Q32	What language do you mainly speak at home?

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Appendix C – Footnote Crosswalk

Hospital Compare Footnote Values

The letter footnotes below are associated with the Hospital Compare quality measures, and the number footnotes in italics below are associated with the Hospital Compare quality measures:

ID	Footnote Text
a	Source: Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey.
b	This is the middle range of payments for the most typical cases treated in this geographic area for this condition or procedure.
c	Number of Medicare Patients Treated: The number of discharges the hospital treated for each MS-DRG for the current data collection period. The United States and state average of Medicare Patients does not include hospitals with zero cases.
d	The payment and volume information is for acute care hospitals. Critical Access Hospitals (CAH) are not included because they are paid using another method.
е	Payment cannot be computed as there were no Medicare discharges for this MS-DRG for the current data collection period.
f	An asterisk (*) appears in the table where data cannot be disclosed to protect personal health information due to the small number of Medicare patients (fewer than 11).
g	This hospital is currently not submitting data for Hospital Process of Care, Hospital Outcome of Care Measures and/or the Hospital Consumer Assessment of Health Providers and Systems (HCAHPS) Patient Survey.
h	This column shows the number of patients with Original Medicare who were admitted to the hospital for heart attack, heart failure or pneumonia conditions. The hospital may also have treated additional Medicare patients in Medicare health plans (like an HMO or PPO).
i	The number of cases is too small (fewer than 25) to reliably tell how well the hospital is performing.
j	Medicare requires hospitals to have at least 25 qualifying cases to have their results reported. This hospital had less than 25 cases.
1	The number of cases is too small to reliably tell how well a hospital is performing.
	For each measure, the rate is the percent of patients for whom the treatment is appropriate. Where these numbers are small (fewer than 25 patients), the calculated rate may not accurately predict the hospital's future performance. As the quality data base is expanded to a full rolling four quarters of data for each measure, the number of cases used to determine hospitals' rates will likely increase, thereby increasing the reliability and stability of the rates. Note: This footnote does not necessarily reflect hospital size or overall patient volume.
2	The hospital indicated that the data submitted for this measure were based on a sample of cases.
	A rate may be based upon the total number of cases treated by a hospital, or for a facility with a large caseload, a rate may be based on a random sample of the cases the hospital treated. This footnote indicates that a hospital chose to submit data for a sample of its total cases (following specific rules for how to the select the cases).
3	Data were collected during a shorter time period (fewer quarters) than the maximum possible time for this measure.
	Each rate reflects the care given over a specific time period, up to a maximum of four quarters during a 12 month period. The number of quarters of data available is determined by when hospitals first began to report data using a specific measure. This footnote indicates that the hospital's rate was based on data from fewer than the maximum possible number of quarters that the measure was generally collected.

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ID	Footnote Text
4	Suppressed for one or more quarters by CMS.
	Hospitals are required to submit accurate, reportable data to the Centers for Medicare and Medicaid Services (CMS). The rates for these measures were calculated by excluding data that had been suppressed for one or more quarters because they were identified as inaccurate.
5	No data are available from the hospital for this measure.
	Hospitals volunteer to provide data for reporting on Hospital Compare. This footnote is applied when the hospital did not submit any cases for a measure.
6	Fewer than 100 patients completed the HCAHPS survey. Use these scores with caution, as the number of surveys may be too low to reliably assess hospital performance.
	The number of completed surveys the hospital or its vendor provided to CMS is less than 100.
7	Survey results are based on less than 12 months of data.
	This footnote is applied when HCAHPS results are based on less than 12 months of survey data.
8	Survey results are not available for this reporting period.
	This footnote is applied when a hospital did not participate in HCAHPS, did not collect sufficient HCAHPS data for public reporting purposes, or chose to suppress their HCAHPS results.
9	No or very few patients were eligible for the HCAHPS Survey.
	This footnote is applied when a hospital has no patients eligible to participate in the HCAHPS survey.
10	A state average was not calculated because too few hospitals in the state submitted data.
	This footnote is applied when too few hospitals submitted data.
11	There were discrepancies in the data collection process.
	This footnote is applied when there have been deviations from HCAHPS data collection protocols. CMS is working with survey vendors and/or hospitals to correct this situation.
12	Very few patients were eligible for the HCAHPS survey. The scores shown reflect fewer than 50 completed surveys. Use these scores with caution, as the number of surveys may be too low to reliably assess hospital performance.
	This footnote is applied when the number of completed surveys the hospital or its vendor provided to CMS is less than 50.
13	These measures are included in the composite measure calculations but Medicare is not reporting them at this time.
14	No data are available for publication from the hospital for this measure because there were zero central line days.
15	No data are available for publication from the hospital for this measure because this hospital does not have ICU locations.
16	The number of cases is too small (fewer than 10) to reliably tell how well the hospital is performing.
17	No data are available from the hospital for this measure.
18	Number of cases is too small (fewer than 25) to report and excess readmission ratio.
19	The hospital is not included in the Hospital Readmissions Reduction Program.
20	Data aren't available for this reporting as the hospital is a new member of the surgical registry and didn't
	have an opportunity to submit any cases for the measure.

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ID	Footnote Text
21	Data aren't available for the voluntary public reporting of this measure.
†	"0 patients" The notation "0 patients" is applied when no patients met the criteria for inclusion in that particular measure's calculation.

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