

**Data Dictionary for Compare Tool on Medicare.gov and
Provider Data Catalog:
Home Health Quality Reporting Program (HHQRP) and
Value-Based Purchasing (HHVBP)
Version 12.0**

Version Details

Version Number	Date	Details
1.0	January 2020	<p>Measures Removed:</p> <ul style="list-style-type: none"> Emergency Department Use without Hospital Readmission during the First 30 Days of HH (CBE #2505) Rehospitalization during the First 30 Days of Home Health (CBE #2380)
2.0	April 2020	<p>Measures Removed</p> <ul style="list-style-type: none"> How often patients had less pain when moving around
3.0	July 2020	<p>Revisions</p> <ul style="list-style-type: none"> Updated with more recent version of CAHPS tables. Removed duplicative variables: How often patients remained in the community after discharge from home health Footnote for How often patients remained in the community after discharge from home health
4.0	October 2020	<p>Measures Removed:</p> <ul style="list-style-type: none"> How often patients developed new or worsened pressure ulcers (CBE #0678) <p>Measures Added:</p> <ul style="list-style-type: none"> Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury <p>Revisions</p> <ul style="list-style-type: none"> Revised title to reflect transition from Home Health Compare to Care Compare Updated file names and added section on “File Naming Convention” Added section on the HH_MeasureDateRange MMMYYYY.csv file
5.0	July 2021	<p>Measures Removed</p> <ul style="list-style-type: none"> Depression Assessment Conducted Diabetic Foot Care and Patient/Caregiver Education Implemented during All Episodes of Care Multifactor Fall Risk Assessment Conducted for All Patients Who Can Ambulate Pneumococcal Polysaccharide Vaccine Ever Receive Improvement in the Status of Surgical Wounds
6.0	January 2022	<p>Revisions</p> <ul style="list-style-type: none"> Added introduction Changed format Revised variable name in HH_State MMMYYYY.csv for Medicare Spending Per Beneficiary
7.0	April 2022	<p>Measures Added</p> <ul style="list-style-type: none"> Percent of Residents Experiencing One or More Falls with Major Injury Application of Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment

Version Number	Date	Details
8.0	July 2022	Revision <ul style="list-style-type: none"> • Revised variable type for Measure Date Range variable in HH_MeasureDateRange_MMYYYY.csv to be “Character” variable.
9.0	October 2023	Measure Added <ul style="list-style-type: none"> • Home Health Within-Stay Potentially Preventable Hospitalization Measure Removed <ul style="list-style-type: none"> • Drug Education on All Medications Provided to Patient/Caregiver during All Episodes of Care Revision <ul style="list-style-type: none"> • Standardization of data variable names
10.0	October 2024	Measures Removed <ul style="list-style-type: none"> • Acute Care Hospitalization During the First 60 Days of Home Health • Emergency Department Use without Hospitalization During the First 60 days of Home Health Revision <ul style="list-style-type: none"> • Update to Type of Ownership categories
11.0	January 2025	Measure Removed <ul style="list-style-type: none"> • Application of Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan that Addresses Function Process Measure Measures Added <ul style="list-style-type: none"> • Transfer of Health Information to the Patient • Transfer of Health Information to the Provider • Discharge Function Revisions <ul style="list-style-type: none"> • Addition of numerator and denominator values for OASIS measures • Addition of expanded Home Health Value-Based Purchasing (HHVBP) data files and variables
12.0	July 2025	Revisions <ul style="list-style-type: none"> • Addition of Appendix A: Anticipated Home Health Refreshes and Data Collection Periods

Introduction

The Centers for Medicare & Medicaid Services (CMS) created the compare tool on Medicare.gov, a streamlined redesign of the original eight CMS healthcare compare tools. The compare tool provides a single user-friendly interface that enables patients and caregivers to make informed decisions about healthcare based on cost, quality of care, volume of services, and other data. Information about the quality measures on Medicare.gov are presented similarly and clearly across all provider types and care settings. Consumers are able to select multiple facilities and directly compare their performance on quality measure information. To access the compare tool on Medicare.gov, please visit www.medicare.gov/care-compare/.

This document provides information about the Home Health Quality Reporting Program (HHQRP) data on Medicare.gov. Medicare.gov provides data for over 12,000 Home Health Agencies (HHAs). More information about the HH quality measures displayed on Medicare.gov can be found by visiting the HH Quality Reporting Measures Information page at: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/Home-Health-Quality-Measures>. This document now also includes variable information for the expanded Home Health Value-based Purchasing (HHVBP) Model data. This information is based on the variables reported in the Final CY 2024 Annual Performance Report (APR) issued to HHAs in late 2024 and published in the Provider Data Catalog (PDC) in January 2025. Note that HHVBP data are not reported on Medicare.gov.

The information about HHAs on Medicare.gov is typically updated, or refreshed, each quarter in January, April, July, and October; however, the refresh schedule is subject to change and not all measure data will be updated during each quarterly release.

Links to download the data from the zipped comma-separated value (CSV) flat file formats can be found on the PDC website. Archived data are also available in the Provider Data Catalog. To access the Provider Data Catalog website, please visit: <https://data.cms.gov/provider-data/>.

The compare tool on Medicare.gov and the PDC are publicly accessible websites. As works of the U.S. government, Medicare.gov data are in the public domain and permission is not required to reuse them. An attribution to the Centers for Medicare and Medicaid Services as the data source is appreciated. However, Medicare.gov data should not be construed as an endorsement by the U.S. Department of Health and Human Services of any health care provider's products or services. Conveying a false impression of government approval, endorsement or authorization of products or services is forbidden. See 42 U.S.C.1320b-10.

Document Purpose

The purpose of this document is to provide a directory of material for use in the navigation of (1) HH quality information contained with the compare tool on Medicare.gov downloadable databases found on the PDC website and (2) HHVBP information found in the PDC only.

File Naming Convention

The files described in the tables below for home health (HH) agencies are named using the following convention: HH_Key_Words_[RefreshMMYY]. Thus, for the July 2025 refresh, the file with data on providers is "HH_Provider_Jul2025" and the file with national scores is "HH_National_Jul2025."

For HHCAHPS measures, files are named following this convention HHCAHPS_Key_Words_[RefreshMMYY]. Thus, for the July 2025 refresh, the file with HHCAHPS Survey data for providers is "HHCAHPS_Provider_Jul2025."

For HHVBP performance metrics, files are named using the following convention: HHVBP_Key_Words_[PerformanceYear_YYYY]. Thus, for the first performance year of the expanded HHVBP Model, the file with data on provider is “HHVBP_Provider_PerformanceYear_2023” and the file with cohort data is “HHVBP_Cohort_PerformanceYear_2023.” The Table names display the Key Words used in each file name, along with a placeholder Month and Year for the month and year of the refresh associated with the file.

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Table 1: Acronym Index

Acronym	Meaning
ACH	Acute Care Hospitalization During the First 60 Days of Home Health Use
APR	Annual Performance Report
AT	Achievement Threshold
APP	Adjusted Payment Percentage
BM	Benchmark
CAHPS	Consumer Assessment of Healthcare Providers and Systems
CCN	CMS Certification Number
CMS	Centers for Medicare & Medicaid Services
DTC	Discharge to Community or Discharged to Community
ED	Emergency Department
ER	Emergency Room
IT	Improvement Threshold
HH	Home Health
HHA	Home Health Agency
LEF	Linear Exchange Function
NA	Not available
OASIS	Outcome and Assessment Information Set
PAC	Post-Acute Care
PDC	Provider Data Catalog
PPH	Potentially Preventable Hospitalization
PPR	Potentially Preventable Readmission
PY	Performance Year
TNC	Total Normalized Composite
TPS	Total Performance Score
QRP	Quality Reporting Program
VBP	Value-Based Purchasing

Table 2: File Summary

The list below shows the titles of all CSV flat file names included in the downloadable database. CSV Flat Files Note: Opening CSV files in Excel will remove leading zeros from data fields. Since some data, such as provider numbers, contain leading zeroes, it is recommended that you open CSV files using text editor programs such as Notepad to copy or view CSV file content. The CSV column names and file names should mirror the datasets found on <https://data.cms.gov/provider-data/>.

File Name*	PDC Dataset Title	Description
HH_Provider MMMYYYY.csv	Home Health Care Agencies	A list of home health care facilities with data on the HHQRP quality of patient care measures.
HH_State_MMM_YYYY.csv	Home Health Care – State by State Data	State data on the HHQRP quality of patient care measures.
HH_National MMMYYYY.csv	Home Health Care National Data	National data on the HHQRP quality of patient care measures.
HH_ZIP MMMYYYY.csv	Home Health Care – Zip Codes	This file contains information on the areas served by the home health agency. It is based on OASIS assessments submitted by the home health agency during the data collection period. There is one record for each ZIP code in which there was at least one patient served by the home health agency.
HH_MeasureDateRange MMMYYYY.csv	Home Health Care – Measure Date Range	A list of the HHQRP quality of patient care measure data collection periods.
HHCAHPS_Provider MMMYYYY.csv	Home Health Care – Patient Survey (HHCAHPS) YYYYQX to YYYYQX	A list of the home health care facilities with data on the HHCAHPS patient survey measures.
HHCAHPS_National MMMYYYY.csv	Home Health Care – Patient Survey (HHCAHPS) National Data YYYYQX to YYYYQX	National data on the HHCAHPS patient survey measures.
HHCAHPS_State MMMYYYY.csv	Home Health Care – Patient Survey (HHCAHPS) State Data YYYYQX to YYYYQX	State data on the HHCAHPS patient survey measures.

File Name*	PDC Dataset Title	Description
HHCAHPS_MeasureDateRange_MMYYYY.csv	Home Health Care – Patient Survey (HHCAHPS) Measure Dates YYYYQX to YYYYQX	A list of the HHCAHPS patient survey measure data collection periods.
HHVBP_Provider_PerformanceYear_YYYY.csv	Expanded Home Health Value-based Purchasing (HHVBP) Model – Agency Data	A list of active home health care agencies with data on the HHVBP performance metrics.
HHVBP_Cohort_PerformanceYear_YYYY.csv	Expanded Home Health Value-based Purchasing (HHVBP) Model – Cohort Data	Cohort data on the HHVBP performance metrics.
HHS_Data_Dictionary.pdf	HHS Data Dictionary	Data dictionary
readme.txt	N/A	Information about viewing the data dictionary PDF file.

*HHCAHPS dataset names include the refresh-specific data range, the above format, for each of the four datasets available on the PDC. Thus, the dataset name will change for each refresh to align with the content of the files.

Table 3: HH_Provider_MM YYYY.csv (66 columns) Variables

Column Number	Variable Name	Variable Type	Description
1.	State	Character	The two character postal code for the state or territory in which the home health agency is located.
2.	CMS Certification Number (CCN)	Numeric	The six character identification number assigned to the home health agency by CMS.
3.	Provider Name	Character	The name of the home health agency as it appears in the CMS certification system.
4.	Address	Character	The street address of the home health agency.
5.	City/Town	Character	The city/town in which the home health agency is located.
6.	ZIP Code	Numeric	The five-digit ZIP code of the home health agency.
7.	Telephone Number	Numeric	The ten-digit telephone number of the home health agency.
8.	Type of Ownership	Character	The general control type of the home health agency. Categories include: <ul style="list-style-type: none">• Non-Profit• Proprietary• Government Operated
9.	Offers Nursing Care Services	Character	Yes or No.
10.	Offers Physical Therapy Services	Character	Yes or No.
11.	Offers Occupational Therapy Services	Character	Yes or No.
12.	Offers Speech Pathology Services	Character	Yes or No.
13.	Offers Medical Social Services	Character	Yes or No.
14.	Offers Home Health Aide Services	Character	Yes or No.
15.	Certification Date	Date	The original date the home health agency was certified to participate in the Medicare program.
16.	Quality of patient care star rating	Numeric	A numeric rating from 1 through 5, in increments of 0.5.
17.	Footnote for quality of patient care star rating	Character	If the rating value is missing (blank), the reason the rating was not calculated is explained here.
18.	Numerator for how often the home health team began their patients' care in a timely manner	Numeric	The measure numerator.
19.	Denominator for how often the home health team began their patients' care in a timely manner	Numeric	The measure denominator.

Column Number	Variable Name	Variable Type	Description
20.	How often the home health team began their patients' care in a timely manner	Numeric	The measure percentage as reported on Medicare.gov.
21.	Footnote for how often the home health team began their patients' care in a timely manner	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
22.	Numerator for how often the home health team determined whether patients received a flu shot for the current flu season	Numeric	The measure numerator.
23.	Denominator for how often the home health team determined whether patients received a flu shot for the current flu season	Numeric	The measure denominator.
24.	How often the home health team determined whether patients received a flu shot for the current flu season	Numeric	The measure percentage as reported on Medicare.gov.
25.	Footnote for how often the home health team determined whether patients received a flu shot for the current flu season	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
26.	Numerator for how often patients got better at walking or moving around	Numeric	The measure numerator.
27.	Denominator for how often patients got better at walking or moving around	Numeric	The measure denominator.
28.	How often patients got better at walking or moving around	Numeric	The measure percentage as reported on Medicare.gov.
29.	Footnote for how often patients got better at walking or moving around	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
30.	Numerator for how often patients got better at getting in and out of bed	Numeric	The measure numerator.
31.	Denominator for how often patients got better at getting in and out of bed	Numeric	The measure denominator.

Column Number	Variable Name	Variable Type	Description
32.	How often patients got better at getting in and out of bed	Numeric	The measure percentage as reported on Medicare.gov.
33.	Footnote for how often patients got better at getting in and out of bed	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
34.	Numerator for how often patients got better at bathing	Numeric	The measure numerator.
35.	Denominator for how often patients got better at bathing	Numeric	The measure denominator.
36.	How often patients got better at bathing	Numeric	The measure percentage as reported on Medicare.gov.
37.	Footnote for how often patients got better at bathing	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
38.	Numerator for how often patients' breathing improved	Numeric	The measure numerator.
39.	Denominator for how often patients' breathing improved	Numeric	The measure denominator.
40.	How often patients' breathing improved	Numeric	The measure percentage as reported on Medicare.gov.
41.	Footnote for how often patients' breathing improved	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
42.	Numerator for how often patients got better at taking their drugs correctly by mouth	Numeric	The measure numerator.
43.	Denominator for how often patients got better at taking their drugs correctly by mouth	Numeric	The measure denominator.
44.	How often patients got better at taking their drugs correctly by mouth	Numeric	The measure percentage as reported on Medicare.gov.
45.	Footnote for how often patients got better at taking their drugs correctly by mouth	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
46.	Numerator for Changes in skin integrity post-acute care: pressure ulcer/injury	Numeric	The measure numerator.

Column Number	Variable Name	Variable Type	Description
47.	Denominator for Changes in skin integrity post-acute care: pressure ulcer/injury	Numeric	The measure denominator.
48.	Changes in skin integrity post-acute care: pressure ulcer/injury	Numeric	The measure percentage as reported on Medicare.gov.
49.	Footnote for changes in skin integrity post-acute care: pressure ulcer/injury	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
50.	Numerator for how often physician-recommended actions to address medication issues were completely timely	Numeric	The measure numerator.
51.	Denominator for how often physician-recommended actions to address medication issues were completely timely	Numeric	The measure denominator.
52.	How often physician-recommended actions to address medication issues were completely timely	Numeric	The measure percentage as reported on Medicare.gov.
53.	Footnote for how often physician-recommended actions to address medication issues were completely timely	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
54.	Numerator for Percent of Residents Experiencing One or More Falls with Major Injury	Numeric	The measure numerator.
55.	Denominator for Percent of Residents Experiencing One or More Falls with Major Injury	Numeric	The measure denominator.
56.	How often a patient had one or more falls with a major injury	Numeric	The measure percentage as reported on Medicare.gov.
57.	Footnote for how often a patient had one or more falls with a major injury	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.

Column Number	Variable Name	Variable Type	Description
58.	Numerator for Discharge Function Score	Numeric	The measure numerator.
59.	Denominator for Discharge Function Score	Numeric	The measure denominator.
60.	Discharge Function Score	Numeric	The measure percentage as reported on Medicare.gov.
61.	Footnote for Discharge Function Score	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
62.	Numerator for Transfer of Health Information to the Provider	Numeric	The measure numerator.
63.	Denominator for Transfer of Health Information to the Provider	Numeric	The measure denominator.
64.	Transfer of Health Information to the Provider	Numeric	The measure percentage as reported on Medicare.gov.
65.	Footnote for Transfer of Health Information to the Provider	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
66.	Numerator for Transfer of Health Information to the Patient	Numeric	The measure numerator.
67.	Denominator for Transfer of Health Information to the Patient	Numeric	The measure denominator.
68.	Transfer of Health Information to the Patient	Numeric	The measure percentage as reported on Medicare.gov.
69.	Footnote for Transfer of Health Information to the Patient	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
70.	DTC Numerator	Numeric	Observed Number of Discharges to Community
71.	DTC Denominator	Numeric	Number of Eligible Stays for DTC Measure
72.	DTC Observed Rate	Numeric	Observed Discharge to Community Rate
73.	DTC Risk-Standardized Rate	Numeric	Risk-Standardized Discharge to Community Rate
74.	DTC Risk-Standardized Rate (Lower Limit)	Numeric	Lower Limit of the 95% Confidence Interval on the Risk- Standardized Discharge to Community Rate
75.	DTC Risk-Standardized Rate (Upper Limit)	Numeric	Upper Limit of the 95% Confidence Interval on the Risk- Standardized Discharge to Community Rate
76.	DTC Performance Categorization	Character	DTC Comparative Performance Category - One of the following descriptive phrases: "Better than National Rate", "Worse than National Rate", or "Same as National Rate"

Column Number	Variable Name	Variable Type	Description
77.	Footnote for DTC Risk-Standardized Rate	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
78.	PPR Numerator	Numeric	Observed Number of Potentially Preventable Readmissions Following Discharge.
79.	PPR Denominator	Numeric	Number of Eligible Stays for PPR Measure.
80.	PPR Observed Rate	Numeric	Observed Potentially Preventable Readmissions Rate.
81.	PPR Risk-Standardized Rate	Numeric	Risk-Standardized Potentially Preventable Readmissions Rate.
82.	PPR Risk-Standardized Rate (Lower Limit)	Numeric	Lower Limit of the 95% Confidence Interval on the Risk- Standardized Potentially Preventable Readmissions Rate.
83.	PPR Risk-Standardized Rate (Upper Limit)	Numeric	Upper Limit of the 95% Confidence Interval on the Risk- Standardized Potentially Preventable Readmissions Rate.
84.	PPR Performance Categorization	Character	PPR Comparative Performance Category: One of the following descriptive phrases: “Better than National Rate”, “Worse than National Rate”, or “Same as National Rate”.
85.	Footnote for PPR Risk-Standardized Rate	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
86.	PPH Numerator	Numeric	Observed Number of Potentially Preventable Hospitalizations Within-Stay
87.	PPH Denominator	Numeric	Number of Eligible Stays for PPH Measure.
88.	PPH Observed Rate	Numeric	Observed Potentially Preventable Hospitalizations Rate
89.	PPH Risk-Standardized Rate	Numeric	Risk-Standardized Potentially Preventable Hospitalizations Rate
90.	PPH Risk-Standardized Rate (Lower Limit)	Numeric	Lower Limit of the 95% Confidence Interval on the Risk- Standardized Potentially Preventable Hospitalizations Rate
91.	PPH Risk-Standardized Rate (Upper Limit)	Numeric	Upper Limit of the 95% Confidence Interval on the Risk- Standardized Potentially Preventable Hospitalizations Rate
92.	PPH Performance Categorization	Character	PPH Comparative Performance Category: One of the following descriptive phrases: “Better than National Rate”, “Worse than National Rate”, or “Same as National Rate”.
93.	Footnote for PPH Risk-Standardized Rate	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
94.	How much Medicare spends on an episode of care at this agency, compared to Medicare spending across all agencies nationally	Numeric	The measure value as reported on Medicare.gov.

Column Number	Variable Name	Variable Type	Description
95.	Footnote for How much Medicare spends on an episode of care at this agency, compared to Medicare spending across all agencies nationally	Character	If the measure value is missing (blank), the reason the measure was not calculated is explained here.
96.	Number of episodes of care used to calculate how much Medicare spends on an episode of care at this agency, compared to Medicare spending across all agencies nationally.	Numeric	The measure value as reported on Medicare.gov.

Table 4: HH_State_MMYY.csv (23 columns) Variables

Column Number	Variable Name	Variable Type	Description
1.	State	Character	The two character postal code for the state or territory
2.	Quality of patient care star rating	Numeric	A numeric rating from 1 through 5, in increments of 0.5.
3.	Star Rating 1 Percentage	Numeric	A numeric rating of 1.
4.	Star Rating 1.5 Percentage	Numeric	A numeric rating of 1.5.
5.	Star Rating 2 Percentage	Numeric	A numeric rating of 2.
6.	Star Rating 2.5 Percentage	Numeric	A numeric rating of 2.5.
7.	Star Rating 3 Percentage	Numeric	A numeric rating of 3.
8.	Star Rating 3.5 Percentage	Numeric	A numeric rating of 3.5.
9.	Star Rating 4 Percentage	Numeric	A numeric rating of 4.
10.	Star Rating 4.5 Percentage	Numeric	A numeric rating of 4.5.
11.	Star Rating 5 Percentage	Numeric	A numeric rating of 5.
12.	How often the home health team began their patients' care in a timely manner	Numeric	The measure percentage as reported on Medicare.gov.
13.	How often the home health team determined	Numeric	The measure percentage as reported on Medicare.gov.

Column Number	Variable Name	Variable Type	Description
	whether patients received a flu shot for the current flu season		
14.	How often patients got better at walking or moving around	Numeric	The measure percentage as reported on Medicare.gov.
15.	How often patients got better at getting in and out of bed	Numeric	The measure percentage as reported on Medicare.gov.
16.	How often patients got better at bathing	Numeric	The measure percentage as reported on Medicare.gov.
17.	How often patients' breathing improved	Numeric	The measure percentage as reported on Medicare.gov.
18.	How often patients got better at taking their drugs correctly by mouth	Numeric	The measure percentage as reported on Medicare.gov.
19.	Changes in skin integrity post-acute care: pressure ulcer/injury	Numeric	The measure percentage as reported on Medicare.gov.
20.	How often physician-recommended actions to address medication issues were completely timely	Numeric	The measure percentage as reported on Medicare.gov.
21.	How often a patient had one or more falls with a major injury	Numeric	The measure percentage as reported on Medicare.gov.
22.	Discharge Function Score	Numeric	The measure percentage as reported on Medicare.gov.
23.	Transfer of Health Information to the Provider	Numeric	The measure percentage as reported on Medicare.gov.
24.	Transfer of Health Information to the Patient	Numeric	The measure percentage as reported on Medicare.gov.
25.	How much Medicare spends on an episode of care by agencies in this state, compared to Medicare spending across all agencies nationally	Numeric	The measure percentage as reported on Medicare.gov.

Table 5: HH_National_MM YYYY.csv (38 columns) Variables

Column Number	Variable Name	Variable Type	Description
1.	Country	Character	A constant value, equal to “Nation”.
2.	Quality of patient care star rating	Numeric	A numeric rating from 1 through 5, in increments of 0.5.
3.	Star Rating 1 Percentage	Numeric	A numeric rating of 1.
4.	Star Rating 1.5 Percentage	Numeric	A numeric rating of 1.5.
5.	Star Rating 2 Percentage	Numeric	A numeric rating of 2.
6.	Star Rating 2.5 Percentage	Numeric	A numeric rating of 2.5.
7.	Star Rating 3 Percentage	Numeric	A numeric rating of 3.
8.	Star Rating 3.5 Percentage	Numeric	A numeric rating of 3.5.
9.	Star Rating 4 Percentage	Numeric	A numeric rating of 4.
10.	Star Rating 4.5 Percentage	Numeric	A numeric rating of 4.5.
11.	Star Rating 5 Percentage	Numeric	A numeric rating of 5.
12.	How often the home health team began their patients' care in a timely manner	Numeric	The measure percentage as reported on Medicare.gov.
13.	How often the home health team determined whether patients received a flu shot for the current flu season	Numeric	The measure percentage as reported on Medicare.gov.
14.	How often patients got better at walking or moving around	Numeric	The measure percentage as reported on Medicare.gov.
15.	How often patients got better at getting in and out of bed	Numeric	The measure percentage as reported on Medicare.gov.
16.	How often patients got better at bathing	Numeric	The measure percentage as reported on Medicare.gov.
17.	How often patients' breathing improved	Numeric	The measure percentage as reported on Medicare.gov.
18.	How often patients got better at taking their drugs correctly by mouth	Numeric	The measure percentage as reported on Medicare.gov.

Column Number	Variable Name	Variable Type	Description
19.	Changes in skin integrity post-acute care: pressure ulcer/injury	Numeric	The measure percentage as reported on Medicare.gov.
20.	How often physician-recommended actions to address medication issues were completely timely	Numeric	The measure percentage as reported on Medicare.gov.
21.	How often a patient had one or more falls with a major injury	Numeric	The measure percentage as reported on Medicare.gov.
22.	Discharge Function Score	Numeric	The measure percentage as reported on Medicare.gov.
23.	Transfer of Health Information to the Provider	Numeric	The measure percentage as reported on Medicare.gov.
24.	Transfer of Health Information to the Patient	Numeric	The measure percentage as reported on Medicare.gov.
25.	PPR Number of HHAs that Performed Better than the National Observed Rate	Numeric	Number of HHAs that Performed Better than the National Observed Rate
26.	PPR Number of HHAs that Performed No Different than the National Observed Rate	Numeric	Number of HHAs that Performed No Different than the National Observed Rate
27.	PPR Number of HHAs that Performed Worse than the National Observed Rate	Numeric	Number of HHAs that Performed Worse than the National Observed Rate
28.	PPR Number of HHAs that Have Too Few Cases for Public Reporting	Numeric	Number of HHAs Too Small to Report
29.	PPR National Observed Rate	Numeric	National Observed Preventable Readmission Rate
30.	DTC Number of HHAs that Performed Better than the National Observed Rate	Numeric	Number of HHAs that Performed Better than the National Observed Rate

Column Number	Variable Name	Variable Type	Description
31.	DTC Number of HHAs that Performed No Different than the National Observed Rate	Numeric	Number of HHAs that Performed No Different than the National Observed Rate
32.	DTC Number of HHAs that Performed Worse than the National Observed Rate	Numeric	Number of HHAs that Performed Worse than the National Observed Rate
33.	DTC Number of HHAs that Have Too Few Cases for Public Reporting	Numeric	Number of HHAs Too Small to Report
34.	DTC National Observed Rate	Numeric	National Observed Discharge to Community Rate
35.	PPH Number of HHAs that Performed Better than the National Observed Rate	Numeric	Number of HHAs that Performed Better than the National Observed Rate
36.	PPH Number of HHAs that Performed No Different than the National Observed Rate	Numeric	Number of HHAs that Performed No Different than the National Observed Rate
37.	PPH Number of HHAs that Performed Worse than the National Observed Rate	Numeric	Number of HHAs that Performed Worse than the National Observed Rate
38.	PPH Number of HHAs that Have Too Few Cases for Public Reporting	Numeric	Number of HHAs Too Small to Report
39.	PPH National Observed Rate	Numeric	National Observed Preventable Hospitalization Rate
40.	How much Medicare spends on an episode of care at this agency, compared to Medicare spending across all agencies nationally	Numeric	The measure percentage as reported on Medicare.gov.

Table 6: HH_ZIP_MM YYYY.csv (3 columns)

Column Number	Variable	Variable Type	Description
1.	State	Character	The two character postal code for the state or territory in which the home health agency is located.
2.	CMS Certification Number (CCN)	Character	The six character identification number assigned to the home health agency by CMS.
3.	ZIP Code	Character	The five-digit ZIP code where service was provided.

Table 7: HH_MeasureDateRange_MM YYYY.csv (2 columns)

Column Number	Variable	Variable Type	Description
1.	Measure Name	Character	The name of the measure.
2.	Measure Date Range	Character	The first date (Month Date, Year) through the last date (Month Date, Year) of the measure date range for each measure.

Table 8: HHCAHPS_Provider_MM YYYY.csv (26 columns)

Column Number	Variable	Variable Type	Description
1.	CMS Certification Number (CCN)	Character	The six-character identification number assigned to the home health agency by CMS.
2.	HHCAHPS Survey Summary Star Rating	Numeric	1-5; Not Available if not calculated
3.	HHCAHPS Survey Summary Star Rating Footnote	Character	8-12 [Footnote text in Table 12]
4.	Star Rating for health team gave care in a professional way	Numeric	1-5; Not Available if not calculated
5.	Footnote for Star Rating for gave care in a professional way	Character	8-12 [Footnote text in Table 12]

Column Number	Variable	Variable Type	Description
6.	Percent of patients who reported that their home health team gave care in a professional way	Numeric	0-100; Not Available if not calculated
7.	Footnote for Percent of patients who reported that their home health team gave care in a professional way	Character	8-12 [<i>Footnote text in Table 12</i>]
8.	Star Rating for health team communicated well with them	Numeric	1-5; Not Available if not calculated
9.	Footnote for Star Rating for communicated well with them	Character	8-12 [<i>Footnote text in Table 12</i>]
10.	Percent of patients who reported that their home health team communicated well with them	Numeric	0-100; Not Available if not calculated
11.	Footnote for Percent of patients who reported that their home health team communicated well with them	Character	8-12 [<i>Footnote text in Table 12</i>]
12.	Star Rating team discussed medicines, pain, and home safety	Numeric	1-5; Not Available if not calculated
13.	Footnote Star Rating discussed medicines, pain, home safety	Character	8-12 [<i>Footnote text in Table 12</i>]
14.	Percent of patients who reported that their home health team discussed medicines, pain, and home safety with them	Numeric	0-100; Not Available if not calculated

Column Number	Variable	Variable Type	Description
15.	Footnote for Percent of patients who reported that their home health team discussed medicines, pain, and home safety with them	Character	8-12 [Footnote text in Table 12]
16.	Star Rating for how patients rated overall care from agency	Numeric	1-5; Not Available if not calculated
17.	Footnote for Star Rating for overall care from agency	Character	8-12 [Footnote text in Table 12]
18.	Percent of patients who gave their home health agency a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	Numeric	0-100; Not Available if not calculated
19.	Footnote for Percent of patients who gave their home health agency a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	Character	8-12 [Footnote text in Table 12]
20.	Percent of patients who reported YES, they would definitely recommend the home health agency to friends and family	Numeric	0-100; Not Available if not calculated
21.	Footnote for Percent of patients who reported YES, they would definitely recommend the home health agency to friends and family	Character	8-12 [Footnote text in Table 12]
22.	Number of completed Surveys	Numeric	0 – 5,000
23.	Footnote for number of completed surveys	Character	8-12 [Footnote text in Table 12]

Column Number	Variable	Variable Type	Description
24.	Survey response rate	Numeric	0-100; Not Available if not calculated
25.	Footnote for survey response rate	Character	8-12 [Footnote text in Table 12]
	Footnote Number	Character	8-12 [Footnote text in Table 12]

Table 9: HHCAHPS_National_MM YYYY.csv (8 columns) Variables

Column Number	Variable	Variable Type	Description
1.	Country	Character	A constant value, equal to “Nation”.
2.	Percent of patients who reported that their home health team gave care in a professional way	Numeric	0-100
3.	Percent of patients who reported that their home health team communicated well with them	Numeric	0-100
4.	Percent of patients who reported that their home health team discussed medicines, pain, and home safety with them	Numeric	0-100
5.	Percent of patients who gave their home health agency a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	Numeric	0-100

Column Number	Variable	Variable Type	Description
6.	Percent of patients who reported YES, they would definitely recommend the home health agency to friends and family	Numeric	0-100
7.	Number of completed Surveys	Numeric	0-9,999,999
8.	Survey response rate	Numeric	0-100

Table 10: HHCAHPS_State_MMYY.csv (8 columns)

Column Number	Variable	Variable Type	Description
1.	State	Character	The two-character postal code for the state or territory
2.	Percent of patients who reported that their home health team gave care in a professional way	Numeric	0-100
3.	Percent of patients who reported that their home health team communicated well with them	Numeric	0-100
4.	Percent of patients who reported that their home health team discussed medicines, pain, and home safety with them	Numeric	0-100
5.	Percent of patients who gave their home health agency a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	Numeric	0-100
6.	Percent of patients who reported YES, they would definitely recommend the home	Numeric	0-100

Column Number	Variable	Variable Type	Description
	health agency to friends and family		
7.	Number of completed Surveys	Numeric	0-9,999,999
8.	Survey response rate	Numeric	0-100

Table 11: HHCAHPS_MeasureDateRange_MM YYYY.csv (2 columns)

Column Number	Variable	Variable Type	Description
1.	The descriptive measure name	Character	The name of the measure.
2.	The months covered by the data collection period for this measure	Character	The first date (Month Date, Year) through the last date (Month Date, Year) of the measure date range for each measure.

Table 12: HHVBP_Provider_PerformanceYear_YYYY.csv (252 columns)

Column Number	Variable Name	Variable Type	Description
1.	CMS Certification Number (CCN)	Character	The six character identification number assigned to the home health agency by the Centers for Medicare and Medicaid Services (CMS).
2.	State	Character	The two character postal code for the state or territory in which the home health agency is located.
3.	Provider Name	Character	The legal name of the home health agency as it appears in the CMS certification system.
4.	Provider Address	Character	The street address, five-digit ZIP code, city/town, and state of the home health agency.
5.	Nationwide Cohort	Character	The nationwide cohort of the home health agency to which the home health agency is assigned: Larger-volume cohort or smaller-volume cohort.
6.	Footnote Nationwide Cohort	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
7.	Discharged to Community: PY HHA Data Period	Character	Discharged to Community (OASIS-based): The HHA's performance year (12-month end date) used to calculate the HHA's risk-adjusted value for this measure in the performance year (PY).
8.	Footnote Discharged to Community: PY HHA Data Period	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
9.	Oral Medications: PY HHA Data Period	Character	Improvement in Management of Oral Medications (OASIS-based): The HHA's performance year (12-month end date) used to calculate the HHA's risk-

Column Number	Variable Name	Variable Type	Description
			adjusted value for this measure in the performance year (PY).
10.	Footnote Oral Medications: PY HHA Data Period	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
11.	Dyspnea: PY HHA Data Period	Character	Improvement in Dyspnea (OASIS-based): The HHA's performance year (12-month end date) used to calculate the HHA's risk-adjusted value for this measure in the performance year (PY).
12.	Footnote Dyspnea: PY HHA Data Period	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
13.	TNC Mobility: PY HHA Data Period	Character	Total Normalized Composite Change in Mobility (OASIS-based): The HHA's performance year (12-month end date) used to calculate the HHA's risk-adjusted value for this measure in the performance year (PY).
14.	Footnote TNC Mobility: PY HHA Data Period	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
15.	TNC Self-Care: PY HHA Data Period	Character	Total Normalized Composite Change in Self-Care (OASIS-based): The HHA's performance year (12-month end date) used to calculate the HHA's risk-adjusted value for this measure in the performance year (PY).
16.	Footnote TNC Self-Care: PY HHA Data Period	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
17.	ACH: PY HHA Data Period	Character	Acute Care Hospitalization During the First 60 Days of Home Health (claims-based): The HHA's performance year (12-month end date) used to calculate the HHA's risk-adjusted value for this measure in the performance year (PY).
18.	Footnote ACH: PY HHA Data Period	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
19.	ED Use: PY HHA Data Period	Character	Emergency Department Use without Hospitalization During the First 60 Days of Home Health (claims-based): The HHA's performance year (12-month end date) used to calculate the HHA's risk-adjusted value for this measure in the performance year (PY).
20.	Footnote ED Use: PY HHA Data Period	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
21.	Care of Patients: PY HHA Data Period	Character	Care of Patients (HHCAHPS Survey-based): The HHA's performance year (12-month end date) used to calculate the HHA's risk-adjusted value for this measure in the performance year (PY).
22.	Footnote Care of Patients: PY HHA Data Period	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.

Column Number	Variable Name	Variable Type	Description
23.	Communication: PY HHA Data Period	Character	Communications Between Providers and Patients (HHCAHPS Survey-based): The HHA's performance year (12-month end date) used to calculate the HHA's risk-adjusted value for this measure in the performance year (PY).
24.	Footnote Communication: PY HHA Data Period	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
25.	Specific Care Issues: PY HHA Data Period	Character	Specific Care Issues (HHCAHPS Survey-based): The HHA's performance year (12-month end date) used to calculate the HHA's risk-adjusted value for this measure in the performance year (PY).
26.	Footnote Specific Care Issues: PY HHA Data Period	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
27.	Overall Rating: PY HHA Data Period	Character	Overall Rating of Home Health Care (HHCAHPS Survey-based): The HHA's performance year (12-month end date) used to calculate the HHA's risk-adjusted value for this measure in the performance year (PY).
28.	Footnote Overall Rating: PY HHA Data Period	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
29.	Willingness to Recommend: PY HHA Data Period	Character	Willingness to Recommend the Agency (HHCAHPS Survey-based): The HHA's performance year (12-month end date) used to calculate the HHA's risk-adjusted value for this measure in the performance year (PY).
30.	Footnote Willingness to Recommend: PY HHA Data Period	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
31.	Discharged to Community: PY HHA Measure Value	Character	Discharged to Community (OASIS-based): The HHA's risk-adjusted measure value for this measure in the performance year (PY).
32.	Footnote Discharged to Community: PY HHA Measure Value	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
33.	Dyspnea: PY HHA Measure Value	Character	Improvement in Dyspnea (OASIS-based): The HHA's risk-adjusted measure value for this measure in the performance year (PY).
34.	Footnote Dyspnea: PY HHA Measure Value	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
35.	Oral Medications: PY HHA Measure Value	Character	Improvement in Management of Oral Medications (OASIS-based): The HHA's risk-adjusted measure value for this measure in the performance year (PY).
36.	Footnote Oral Medications: PY HHA Measure Value	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.

Column Number	Variable Name	Variable Type	Description
37.	TNC Mobility: PY HHA Measure Value	Character	Total Normalized Composite Change in Mobility (OASIS-based): The HHA's risk-adjusted measure value for this measure in the performance year (PY).
38.	Footnote TNC Mobility: PY HHA Measure Value	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
39.	TNC Self-Care: PY HHA Measure Value	Character	Total Normalized Composite Change in Self-Care (OASIS-based): The HHA's risk-adjusted measure value for this measure in the performance year (PY).
40.	Footnote TNC Self-Care: PY HHA Measure Value	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
41.	ACH: PY HHA Measure Value	Character	Acute Care Hospitalization During the First 60 Days of Home Health (claims-based): The HHA's risk-adjusted measure value for this measure in the performance year (PY).
42.	Footnote ACH: PY HHA Measure Value	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
43.	ED Use: PY HHA Measure Value	Character	Emergency Department Use without Hospitalization During the First 60 Days of Home Health (claims-based): The HHA's risk-adjusted measure value for this measure in the performance year (PY).
44.	Footnote ED Use: PY HHA Measure Value	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
45.	Care of Patients: PY HHA Measure Value	Character	Care of Patients (HHCAHPS Survey-based): The HHA's risk-adjusted measure value for this measure in the performance year (PY).
46.	Footnote Care of Patients: PY HHA Measure Value	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
47.	Communication: PY HHA Measure Value	Character	Communications between Providers and Patients (HHCAHPS Survey-based): The HHA's risk-adjusted measure value for this measure in the performance year (PY).
48.	Footnote Communication: PY HHA Measure Value	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
49.	Specific Care Issues: PY HHA Measure Value	Character	Specific Care Issues (HHCAHPS Survey-based): The HHA's risk-adjusted measure value for this measure in the performance year (PY).
50.	Footnote Specific Care Issues: PY HHA Measure Value	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
51.	Overall Rating: PY HHA Measure Value	Character	Overall Rating of Home Health Care (HHCAHPS Survey-based): The HHA's risk-adjusted measure value for this measure in the performance year (PY).

Column Number	Variable Name	Variable Type	Description
52.	Footnote Overall Rating: PY HHA Measure Value	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
53.	Willingness to Recommend: PY HHA Measure Value	Character	Willingness to Recommend the Agency (HHCAHPS Survey-based): The HHA's risk-adjusted measure value for this measure in the performance year (PY).
54.	Footnote Willingness to Recommend: PY HHA Measure Value	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
55.	Discharged to Community: HHA Achievement Points	Character	Discharged to Community (OASIS-based): The home health agency's Achievement Points for the measure, ranging from zero (0) to ten (10).
56.	Footnote Discharged to Community: HHA Achievement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
57.	Dyspnea: HHA Achievement Points	Character	Improvement in Dyspnea (OASIS-based): The home health agency's Achievement Points for the measure, ranging from zero (0) to ten (10).
58.	Footnote Dyspnea: HHA Achievement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
59.	Oral Medications: HHA Achievement Points	Character	Improvement in Management of Oral Medications (OASIS-based): The home health agency's Achievement Points for the measure, ranging from zero (0) to ten (10).
60.	Footnote Oral Medications: HHA Achievement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
61.	TNC Mobility: HHA Achievement Points	Character	Total Normalized Composite Change in Mobility (OASIS-based): The home health agency's Achievement Points for the measure, ranging from zero (0) to ten (10).
62.	Footnote TNC Mobility: HHA Achievement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
63.	TNC Self-Care: HHA Achievement Points	Character	Total Normalized Composite Change in Self-Care (OASIS-based): The home health agency's Achievement Points for the measure, ranging from zero (0) to ten (10).
64.	Footnote TNC Self-Care: HHA Achievement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
65.	ACH: HHA Achievement Points	Character	Acute Care Hospitalization During the First 60 Days of Home Health (claims-based): The home health agency's Achievement Points for the measure, ranging from zero (0) to ten (10).
66.	Footnote ACH: HHA Achievement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.

Column Number	Variable Name	Variable Type	Description
67.	ED Use: HHA Achievement Points	Character	Emergency Department Use without Hospitalization During the First 60 Days of Home Health (claims-based): The home health agency's Achievement Points for the measure, ranging from zero (0) to ten (10).
68.	Footnote ED Use: HHA Achievement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
69.	Care of Patients: HHA Achievement Points	Character	Care of Patients (HHCAHPS Survey-based): The home health agency's Achievement Points for the measure, ranging from zero (0) to ten (10).
70.	Footnote Care of Patients: HHA Achievement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
71.	Communication: HHA Achievement Points	Character	Communications between Providers and Patients (HHCAHPS Survey-based): The home health agency's Achievement Points for the measure, ranging from zero (0) to ten (10).
72.	Footnote Communication: HHA Achievement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
73.	Specific Care Issues: HHA Achievement Points	Character	Specific Care Issues (HHCAHPS Survey-based): The home health agency's Achievement Points for the measure, ranging from zero (0) to ten (10).
74.	Footnote Specific Care Issues: HHA Achievement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
75.	Overall Rating: HHA Achievement Points	Character	Specific Care Issues (HHCAHPS Survey-based): The home health agency's Achievement Points for the measure, ranging from zero (0) to ten (10).
76.	Footnote Overall Rating: HHA Achievement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
77.	Willingness to Recommend: HHA Achievement Points	Character	Willingness to Recommend the Agency (HHCAHPS Survey-based): The home health agency's Achievement Points for the measure, ranging from zero (0) to ten (10).
78.	Footnote Willingness to Recommend: HHA Achievement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
79.	Discharged to Community: HHA Baseline Year	Character	Discharged to Community (OASIS-based): The HHA's baseline year (12-month end date) used to calculate the HHA's Improvement Threshold for this measure.
80.	Footnote Discharged to Community: HHA Baseline Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.

Column Number	Variable Name	Variable Type	Description
81.	Oral Medications: HHA Baseline Year	Character	Improvement in Management of Oral Medications (OASIS-based): The HHA's baseline year (12-month end date) used to calculate the HHA's Improvement Threshold for this measure.
82.	Footnote Oral Medications: HHA Baseline Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
83.	Dyspnea: HHA Baseline Year	Character	Improvement in Dyspnea (OASIS-based): The HHA's baseline year (12-month end date) used to calculate the HHA's Improvement Threshold for this measure.
84.	Footnote Dyspnea: HHA Baseline Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
85.	TNC Mobility: HHA Baseline Year	Character	Total Normalized Composite Change in Mobility (OASIS-based): The HHA's baseline year (12-month end date) used to calculate the HHA's Improvement Threshold for this measure.
86.	Footnote TNC Mobility: HHA Baseline Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
87.	TNC Self-Care: HHA Baseline Year	Character	Total Normalized Composite Change in Self-Care (OASIS-based): The HHA's baseline year (12-month end date) used to calculate the HHA's Improvement Threshold for this measure.
88.	Footnote TNC Self-Care: HHA Baseline Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
89.	ACH: HHA Baseline Year	Character	Acute Care Hospitalization During the First 60 Days of Home Health (claims-based): The HHA's baseline year (12-month end date) used to calculate the HHA's Improvement Threshold for this measure.
90.	Footnote ACH: HHA Baseline Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
91.	ED Use: HHA Baseline Year	Character	Emergency Department Use without Hospitalization During the First 60 Days of Home Health (claims-based): The HHA's baseline year (12-month end date) used to calculate the HHA's Improvement Threshold for this measure.
92.	Footnote ED Use: HHA Baseline Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
93.	Care of Patients: HHA Baseline Year	Character	Care of Patients (HHCAHPS Survey-based): The HHA's baseline year (12-month end date) used to calculate the HHA's Improvement Threshold for this measure.
94.	Footnote Care of Patients: HHA Baseline Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.

Column Number	Variable Name	Variable Type	Description
95.	Communication: HHA Baseline Year	Character	Communications Between Providers and Patients (HHCAHPS Survey-based): The HHA's baseline year (12-month end date) used to calculate the HHA's Improvement Threshold for this measure.
96.	Footnote Communication: HHA Baseline Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
97.	Specific Care Issues: HHA Baseline Year	Character	Specific Care Issues (HHCAHPS Survey-based): The HHA's baseline year (12-month end date) used to calculate the HHA's Improvement Threshold for this measure.
98.	Footnote Specific Care Issues: HHA Baseline Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
99.	Overall Rating: HHA Baseline Year	Character	Overall Rating of Home Health Care (HHCAHPS Survey-based): The HHA's baseline year (12-month end date) used to calculate the HHA's Improvement Threshold for this measure.
100.	Footnote Overall Rating: HHA Baseline Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
101.	Willingness to Recommend: HHA Baseline Year	Character	Willingness to Recommend the Agency (HHCAHPS Survey-based): The HHA's baseline year (12-month end date) used to calculate the HHA's Improvement Threshold for this measure.
102.	Footnote Willingness to Recommend: HHA Baseline Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
103.	Discharged to Community: HHA Improvement Threshold	Character	Discharged to Community (OASIS-based): The Improvement Threshold for this measure, which is the HHA's risk-adjusted measure value for this measure in the HHA Baseline Year.
104.	Footnote Discharged to Community: HHA Improvement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
105.	Dyspnea: HHA Improvement Threshold	Character	Improvement in Dyspnea (OASIS-based): The Improvement Threshold for this measure, which is the HHA's risk-adjusted measure value for this measure in the HHA Baseline Year.
106.	Footnote Dyspnea: HHA Improvement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
107.	Oral Medications: HHA Improvement Threshold	Character	Improvement in Management of Oral Medications (OASIS-based): The Improvement Threshold for this measure, which is the HHA's risk-adjusted measure value for this measure in the HHA Baseline Year.
108.	Footnote Oral Medications: HHA Improvement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.

Column Number	Variable Name	Variable Type	Description
109.	TNC Mobility: HHA Improvement Threshold	Character	Total Normalized Composite Change in Mobility (OASIS-based): The Improvement Threshold for this measure, which is the HHA's risk-adjusted measure value for this measure in the HHA Baseline Year.
110.	Footnote TNC Mobility: HHA Improvement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
111.	TNC Self-Care: HHA Improvement Threshold	Character	Total Normalized Composite Change in Self-Care (OASIS-based): The Improvement Threshold for this measure, which is the HHA's risk-adjusted measure value for this measure in the HHA Baseline Year.
112.	Footnote TNC Self-Care: HHA Improvement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
113.	ACH: HHA Improvement Threshold	Character	Acute Care Hospitalization During the First 60 Days of Home Health (claims-based): The Improvement Threshold for this measure, which is the HHA's risk-adjusted measure value for this measure in the HHA Baseline Year.
114.	Footnote ACH: HHA Improvement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
115.	ED Use: HHA Improvement Threshold	Character	Emergency Department Use without Hospitalization During the First 60 Days of Home Health (claims-based): The Improvement Threshold for this measure, which is the HHA's risk-adjusted measure value for this measure in the HHA Baseline Year.
116.	Footnote ED Use: HHA Improvement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
117.	Care of Patients: HHA Improvement Threshold	Character	Care of Patients (HHCAHPS Survey-based): The Improvement Threshold for this measure, which is the HHA's risk-adjusted measure value for this measure in the HHA Baseline Year.
118.	Footnote Care of Patients: HHA Improvement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
119.	Communication: HHA Improvement Threshold	Character	Communications Between Providers and Patients (HHCAHPS Survey-based): The Improvement Threshold for this measure, which is the HHA's risk-adjusted measure value for this measure in the HHA Baseline Year.
120.	Footnote Communication: HHA Improvement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
121.	Specific Care Issues: HHA Improvement Threshold	Character	Specific Care Issues (HHCAHPS Survey-based): The Improvement Threshold for this measure, which is the HHA's risk-adjusted measure value for this measure in the HHA Baseline Year.

Column Number	Variable Name	Variable Type	Description
122.	Footnote Specific Care Issues: HHA Improvement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
123.	Overall Rating: HHA Improvement Threshold	Character	Specific Care Issues (HHCAHPS Survey-based): The Improvement Threshold for this measure, which is the HHA's risk-adjusted measure value for this measure in the HHA Baseline Year.
124.	Footnote Overall Rating: HHA Improvement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
125.	Willingness to Recommend: HHA Improvement Threshold	Character	Willingness to Recommend the Agency (HHCAHPS Survey-based): The Improvement Threshold for this measure, which is the HHA's risk-adjusted measure value for this measure in the HHA Baseline Year.
126.	Footnote Willingness to Recommend: HHA Improvement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
127.	Discharged to Community: HHA Improvement Points	Character	Discharged to Community (OASIS-based): The HHA's Improvement Points for this measure, ranging from zero (0) to nine (9).
128.	Footnote Discharged to Community: HHA Improvement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
129.	Dyspnea: HHA Improvement Points	Character	Improvement in Dyspnea (OASIS-based): The HHA's Improvement Points for this measure, ranging from zero (0) to nine (9).
130.	Footnote Dyspnea: HHA Improvement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
131.	Oral Medications: HHA Improvement Points	Character	Improvement in Management of Oral Medications (OASIS-based): The HHA's Improvement Points for this measure, ranging from zero (0) to nine (9).
132.	Footnote Oral Medications: HHA Improvement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
133.	TNC Mobility: HHA Improvement Points	Character	Total Normalized Composite Change in Mobility (OASIS-based): The HHA's Improvement Points for this measure, ranging from zero (0) to nine (9).
134.	Footnote TNC Mobility: HHA Improvement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
135.	TNC Self-Care: HHA Improvement Points	Character	Total Normalized Composite Change in Self-Care (OASIS-based): The HHA's Improvement Points for this measure, ranging from zero (0) to nine (9).
136.	Footnote TNC Self-Care: HHA Improvement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.

Column Number	Variable Name	Variable Type	Description
137.	ACH: HHA Improvement Points	Character	Acute Care Hospitalization During the First 60 Days of Home Health (claims-based): The HHA's Improvement Points for this measure, ranging from zero (0) to nine (9).
138.	Footnote ACH: HHA Improvement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
139.	ED Use: HHA Improvement Points	Character	Emergency Department Use without Hospitalization During the First 60 Days of Home Health (claims-based): The HHA's Improvement Points for this measure, ranging from zero (0) to nine (9).
140.	Footnote ED Use: HHA Improvement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
141.	Care of Patients: HHA Improvement Points	Character	Care of Patients (HHCAHPS Survey-based): The HHA's Improvement Points for this measure, ranging from zero (0) to nine (9).
142.	Footnote Care of Patients: HHA Improvement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
143.	Communication: HHA Improvement Points	Character	Communications Between Providers and Patients (HHCAHPS Survey-based): The HHA's Improvement Points for this measure, ranging from zero (0) to nine (9).
144.	Footnote Communication: HHA Improvement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
145.	Specific Care Issues: HHA Improvement Points	Character	Specific Care Issues (HHCAHPS Survey-based): The HHA's Improvement Points for this measure, ranging from zero (0) to nine (9).
146.	Footnote Specific Care Issues: HHA Improvement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
147.	Overall Rating: HHA Improvement Points	Character	Specific Care Issues (HHCAHPS Survey-based): The HHA's Improvement Points for this measure, ranging from zero (0) to nine (9).
148.	Footnote Overall Rating: HHA Improvement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
149.	Willingness to Recommend: HHA Improvement Points	Character	Willingness to Recommend the Agency (HHCAHPS Survey-based): The HHA's Improvement Points for this measure, ranging from zero (0) to nine (9).
150.	Footnote Willingness to Recommend: HHA Improvement Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
151.	Discharged to Community: HHA Care Points	Character	Discharged to Community (OASIS-based): The HHA's Care Points for this measure, ranging from zero (0) to ten (10). The measure's Care Points are the higher of

Column Number	Variable Name	Variable Type	Description
			the measure's Achievement Points or Improvement Points.
152.	Footnote Discharged to Community: HHA Care Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
153.	Dyspnea: HHA Care Points	Character	Improvement in Dyspnea (OASIS-based): The HHA's Care Points for this measure, ranging from zero (0) to ten (10). The measure's Care Points are the higher of the measure's Achievement Points or Improvement Points.
154.	Footnote Dyspnea: HHA Care Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
155.	Oral Medications: HHA Care Points	Character	Improvement in Management of Oral Medications (OASIS-based): The HHA's Care Points for this measure, ranging from zero (0) to ten (10). The measure's Care Points are the higher of the measure's Achievement Points or Improvement Points.
156.	Footnote Oral Medications: HHA Care Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
157.	TNC Mobility: HHA Care Points	Character	Total Normalized Composite Change in Mobility (OASIS-based): The HHA's Care Points for this measure, ranging from zero (0) to ten (10). The measure's Care Points are the higher of the measure's Achievement Points or Improvement Points.
158.	Footnote TNC Mobility: HHA Care Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
159.	TNC Self-Care: HHA Care Points	Character	Total Normalized Composite Change in Self-Care (OASIS-based): The HHA's Care Points for this measure, ranging from zero (0) to ten (10). The measure's Care Points are the higher of the measure's Achievement Points or Improvement Points.
160.	Footnote TNC Self-Care: HHA Care Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
161.	ACH: HHA Care Points	Character	Acute Care Hospitalization During the First 60 Days of Home Health (claims-based): The HHA's Care Points for this measure, ranging from zero (0) to ten (10). The measure's Care Points are the higher of the measure's Achievement Points or Improvement Points.
162.	Footnote ACH: HHA Care Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
163.	ED Use: HHA Care Points	Character	Emergency Department Use without Hospitalization During the First 60 Days of Home Health (claims-based): The HHA's Care Points for this measure, ranging from zero (0) to ten (10). The measure's Care Points are the higher of the measure's Achievement Points or Improvement Points.

Column Number	Variable Name	Variable Type	Description
164.	Footnote ED Use: HHA Care Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
165.	Care of Patients: HHA Care Points	Character	Care of Patients (HHCAHPS Survey-based): The HHA's Care Points for this measure, ranging from zero (0) to ten (10). The measure's Care Points are the higher of the measure's Achievement Points or Improvement Points.
166.	Footnote Care of Patients: HHA Care Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
167.	Communication: HHA Care Points	Character	Communications Between Providers and Patients (HHCAHPS Survey-based): The HHA's Care Points for this measure, ranging from zero (0) to ten (10). The measure's Care Points are the higher of the measure's Achievement Points or Improvement Points.
168.	Footnote Communication: HHA Care Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
169.	Specific Care Issues: HHA Care Points	Character	Specific Care Issues (HHCAHPS Survey-based): The HHA's Care Points for this measure, ranging from zero (0) to ten (10). The measure's Care Points are the higher of the measure's Achievement Points or Improvement Points.
170.	Footnote Specific Care Issues: HHA Care Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
171.	Overall Rating: HHA Care Points	Character	Specific Care Issues (HHCAHPS Survey-based): The HHA's Care Points for this measure, ranging from zero (0) to ten (10). The measure's Care Points are the higher of the measure's Achievement Points or Improvement Points.
172.	Footnote Overall Rating: HHA Care Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
173.	Willingness to Recommend: HHA Care Points	Character	Willingness to Recommend the Agency (HHCAHPS Survey-based): The HHA's Care Points for this measure, ranging from zero (0) to ten (10). The measure's Care Points are the higher of the measure's Achievement Points or Improvement Points.
174.	Footnote Willingness to Recommend: HHA Care Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
175.	Discharged to Community: Included in TPS	Character	Discharged to Community (OASIS-based): Did the home health agency have sufficient data in the baseline year and performance year to create Care Points for this measure and count toward the 5-measure minimum to create a TPS? Yes/No

Column Number	Variable Name	Variable Type	Description
176.	Footnote Discharged to Community: Included in TPS	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
177.	Dyspnea: Included in TPS	Character	Improvement in Dyspnea (OASIS-based): Did the home health agency have sufficient data in the baseline year and performance year to create Care Points for this measure and count toward the 5-measure minimum to create a TPS? Yes/No
178.	Footnote Dyspnea: Included in TPS	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
179.	Oral Medications: Included in TPS	Character	Improvement in Management of Oral Medications (OASIS-based): Did the home health agency have sufficient data in the baseline year and performance year to create Care Points for this measure and count toward the 5-measure minimum to create a TPS? Yes/No
180.	Footnote Oral Medications: Included in TPS	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
181.	TNC Mobility: Included in TPS	Character	Total Normalized Composite Change in Mobility (OASIS-based): Did the home health agency have sufficient data in the baseline year and performance year to create Care Points for this measure and count toward the 5-measure minimum to create a TPS? Yes/No
182.	Footnote TNC Mobility: Included in TPS	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
183.	TNC Self-Care: Included in TPS	Character	Total Normalized Composite Change in Self-Care (OASIS-based): Did the home health agency have sufficient data in the baseline year and performance year to create Care Points for this measure and count toward the 5-measure minimum to create a TPS? Yes/No
184.	Footnote TNC Self-Care: Included in TPS	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
185.	ACH: Included in TPS	Character	Acute Care Hospitalization During the First 60 Days of Home Health (claims-based): Did the home health agency have sufficient data in the baseline year and performance year to create Care Points for this measure and count toward the 5-measure minimum to create a TPS? Yes/No
186.	Footnote ACH: Included in TPS	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.

Column Number	Variable Name	Variable Type	Description
187.	ED Use: Included in TPS	Character	Emergency Department Use without Hospitalization During the First 60 Days of Home Health (claims-based): Did the home health agency have sufficient data in the baseline year and performance year to create Care Points for this measure and count toward the 5-measure minimum to create a TPS? Yes/No
188.	Footnote ED Use: Included in TPS	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
189.	Care of Patients: Included in TPS	Character	Care of Patients (HHCAHPS Survey-based): Did the home health agency have sufficient data in the baseline year and performance year to create Care Points for this measure and count toward the 5-measure minimum to create a TPS? Yes/No
190.	Footnote Care of Patients: Included in TPS	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
191.	Communication: Included in TPS	Character	Communications Between Providers and Patients (HHCAHPS Survey-based): Did the home health agency have sufficient data in the baseline year and performance year to create Care Points for this measure and count toward the 5-measure minimum to create a TPS? Yes/No
192.	Footnote Communication: Included in TPS	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
193.	Specific Care Issues: Included in TPS	Character	Specific Care Issues (HHCAHPS Survey-based): Did the home health agency have sufficient data in the baseline year and performance year to create Care Points for this measure and count toward the 5-measure minimum to create a TPS? Yes/No
194.	Footnote Specific Care Issues: Included in TPS	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
195.	Overall Rating: Included in TPS	Character	Overall Rating of Home Health Care (HHCAHPS Survey-based): Did the home health agency have sufficient data in the baseline year and performance year to create Care Points for this measure and count toward the 5-measure minimum to create a TPS? Yes/No
196.	Footnote Overall Rating: Included in TPS	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
197.	Willingness to Recommend: Included in TPS	Character	Willingness to Recommend the Agency (HHCAHPS Survey-based): Did the home health agency have sufficient data in the baseline year and performance year to create Care Points for this measure and count toward the 5-measure minimum to create a TPS? Yes/No

Column Number	Variable Name	Variable Type	Description
198.	Footnote Willingness to Recommend: Included in TPS	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
199.	Discharged to Community: Measure Weight	Character	Discharged to Community (OASIS-based): The measure's weight.
200.	Footnote Discharged to Community: Measure Weight	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
201.	Dyspnea: Measure Weight	Character	Improvement in Dyspnea (OASIS-based): The measure's weight.
202.	Footnote Dyspnea: Measure Weight	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
203.	Oral Medications: Measure Weight	Character	Improvement in Management of Oral Medications (OASIS-based): The measure's weight.
204.	Footnote Oral Medications: Measure Weight	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
205.	TNC Mobility: Measure Weight	Character	Total Normalized Composite Change in Mobility (OASIS-based): The measure's weight.
206.	Footnote TNC Mobility: Measure Weight	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
207.	TNC Self-Care: Measure Weight	Character	Total Normalized Composite Change in Self-Care (OASIS-based): The measure's weight.
208.	Footnote TNC Self-Care: Measure Weight	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
209.	ACH: Measure Weight	Character	Acute Care Hospitalization During the First 60 Days of Home Health (claims-based): The measure's weight.
210.	Footnote ACH: Measure Weight	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
211.	ED Use: Measure Weight	Character	Emergency Department Use without Hospitalization During the First 60 Days of Home Health (claims-based): The measure's weight.
212.	Footnote ED Use: Measure Weight	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
213.	Care of Patients: Measure Weight	Character	Care of Patients (HHCAHPS Survey-based): The measure's weight.
214.	Footnote Care of Patients: Measure Weight	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
215.	Communication: Measure Weight	Character	Communications Between Providers and Patients (HHCAHPS Survey-based): The measure's weight.
216.	Footnote Communication: Measure Weight	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.

Column Number	Variable Name	Variable Type	Description
217.	Specific Care Issues: Measure Weight	Character	Specific Care Issues (HHCAHPS Survey-based): The measure's weight.
218.	Footnote Specific Care Issues: Measure Weight	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
219.	Overall Rating: Measure Weight	Character	Overall Rating of Home Health Care (HHCAHPS Survey-based): The measure's weight.
220.	Footnote Overall Rating: Measure Weight	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
221.	Willingness to Recommend: Measure Weight	Character	Willingness to Recommend the Agency (HHCAHPS Survey-based): The measure's weight.
222.	Footnote Willingness to Recommend: Measure Weight	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
223.	Discharged to Community: HHA Weighted Measure Points	Character	Discharged to Community (OASIS-based): The HHA's weighted Measure Points for this measure, which are calculated by dividing your HHA's Care Points by the maximum possible points and multiplying by the measure weight.
224.	Footnote Discharged to Community: HHA Weighted Measure Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
225.	Dyspnea: HHA Weighted Measure Points	Character	Improvement in Dyspnea (OASIS-based): The HHA's weighted Measure Points for this measure, which are calculated by dividing your HHA's Care Points by the maximum possible points and multiplying by the measure weight.
226.	Footnote Dyspnea: HHA Weighted Measure Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
227.	Oral Medications: HHA Weighted Measure Points	Character	Improvement in Management of Oral Medications (OASIS-based): The HHA's weighted Measure Points for this measure, which are calculated by dividing your HHA's Care Points by the maximum possible points and multiplying by the measure weight.
228.	Footnote Oral Medications: HHA Weighted Measure Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
229.	TNC Mobility: HHA Weighted Measure Points	Character	Total Normalized Composite Change in Mobility (OASIS-based): The HHA's weighted Measure Points for this measure, which are calculated by dividing your HHA's Care Points by the maximum possible points and multiplying by the measure weight.

Column Number	Variable Name	Variable Type	Description
230.	Footnote TNC Mobility: HHA Weighted Measure Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
231.	TNC Self-Care: HHA Weighted Measure Points	Character	Total Normalized Composite Change in Self-Care (OASIS-based): The HHA's weighted Measure Points for this measure, which are calculated by dividing your HHA's Care Points by the maximum possible points and multiplying by the measure weight.
232.	Footnote TNC Self-Care: HHA Weighted Measure Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
233.	ACH: HHA Weighted Measure Points	Character	Acute Care Hospitalization During the First 60 Days of Home Health (claims-based): The HHA's weighted Measure Points for this measure, which are calculated by dividing your HHA's Care Points by the maximum possible points and multiplying by the measure weight.
234.	Footnote ACH: HHA Weighted Measure Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
235.	ED Use: HHA Weighted Measure Points	Character	Emergency Department Use without Hospitalization During the First 60 Days of Home Health (claims-based): The HHA's weighted Measure Points for this measure, which are calculated by dividing your HHA's Care Points by the maximum possible points and multiplying by the measure weight.
236.	Footnote ED Use: HHA Weighted Measure Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
237.	Care of Patients: HHA Weighted Measure Points	Character	Care of Patients (HHCAHPS Survey-based): The HHA's weighted Measure Points for this measure, which are calculated by dividing your HHA's Care Points by the maximum possible points and multiplying by the measure weight.
238.	Footnote Care of Patients: HHA Weighted Measure Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
239.	Communication: HHA Weighted Measure Points	Character	Communications Between Providers and Patients (HHCAHPS Survey-based): The HHA's weighted Measure Points for this measure, which are calculated by dividing your HHA's Care Points by the maximum possible points and multiplying by the measure weight.
240.	Footnote Communication: HHA Weighted Measure Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.

Column Number	Variable Name	Variable Type	Description
241.	Specific Care Issues: HHA Weighted Measure Points	Character	Specific Care Issues (HHCAHPS Survey-based): The HHA's weighted Measure Points for this measure, which are calculated by dividing your HHA's Care Points by the maximum possible points and multiplying by the measure weight.
242.	Footnote Specific Care Issues: HHA Weighted Measure Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
243.	Overall Rating: HHA Weighted Measure Points	Character	Specific Care Issues (HHCAHPS Survey-based): The HHA's weighted Measure Points for this measure, which are calculated by dividing your HHA's Care Points by the maximum possible points and multiplying by the measure weight.
244.	Footnote Overall Rating: HHA Weighted Measure Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
245.	Willingness to Recommend: HHA Weighted Measure Points	Character	Willingness to Recommend the Agency (HHCAHPS Survey-based): The HHA's weighted Measure Points for this measure, which are calculated by dividing your HHA's Care Points by the maximum possible points and multiplying by the measure weight.
246.	Footnote Willingness to Recommend: HHA Weighted Measure Points	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
247.	Total Performance Score (TPS)	Character	The Total Performance Score for the home health agency which is calculated by summing the weighted Care Points for all measures.
248.	Footnote Total Performance Score (TPS)	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
249.	Payment Year	Character	The calendar year in which the home health agency's Final TPS-Adjusted Payment Percentage (APP) for a designated performance year applies.
250.	Footnote Payment Year	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
251.	Adjusted Payment Percentage (APP)	Character	The home health agency's Final TPS-Adjusted Payment Percentage (APP). The APP ranges from minus 5% to plus 5% for all home health agencies.
252.	Footnote Adjusted Payment Percentage (APP)	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.

Table 13: HHVBP_Cohort_PerformanceYear_YYYY.csv (39 columns)

Column Number	Variable Name	Variable Type	Description
1.	Nationwide Cohort	Character	The two nationwide cohorts to which the home health agencies are assigned: Larger-volume cohort or smaller-volume cohort.
2.	Model Baseline Year	Character	The Model Baseline Year used to calculate the cohort's Achievement Thresholds and Benchmarks.
3.	Discharged to Community: Cohort's Achievement Threshold	Character	Discharged to Community (OASIS-based): The cohort's Achievement Threshold for this measure.
4.	Dyspnea: Cohort's Achievement Threshold	Character	Improvement in Dyspnea (OASIS-based): The cohort's Achievement Threshold for this measure.
5.	Oral Medications: Cohort's Achievement Threshold	Character	Improvement in Management of Oral Medications (OASIS-based): The cohort's Achievement Threshold for this measure.
6.	TNC Mobility: Cohort's Achievement Threshold	Character	Total Normalized Composite Change in Mobility (OASIS-based): The cohort's Achievement Threshold for this measure.
7.	TNC Self-Care: Cohort's Achievement Threshold	Character	Total Normalized Composite Change in Self-Care (OASIS-based): The cohort's Achievement Threshold for this measure.
8.	ACH: Cohort's Achievement Threshold	Character	Acute Care Hospitalization During the First 60 Days of Home Health (claims-based): The cohort's Achievement Threshold for this measure.
9.	ED Use: Cohort's Achievement Threshold	Character	Emergency Department Use without Hospitalization During the First 60 Days of Home Health (claims-based): The cohort's Achievement Threshold for this measure.
10.	Care of Patients: Cohort's Achievement Threshold	Character	Care of Patients (HHCAHPS Survey-based): The cohort's Achievement Threshold for this measure.
11.	Footnote Care of Patients: Cohort's Achievement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
12.	Communication: Cohort's Achievement Threshold	Character	Communication Between Providers and Patients (HHCAHPS Survey-based): The cohort's Achievement Threshold for this measure.
13.	Footnote Communication: Cohort's Achievement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
14.	Specific Care Issues: Cohort's Achievement Threshold	Character	Specific Care Issues (HHCAHPS-Survey-based): The cohort's Achievement Threshold for this measure.
15.	Footnote Specific Care Issues: Cohort's Achievement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.

Column Number	Variable Name	Variable Type	Description
16.	Overall Rating: Cohort's Achievement Threshold	Character	Overall Rating of Home Health Care (HHCAHPS-Survey-based): The cohort's Achievement Threshold for this measure.
17.	Footnote Overall Rating: Cohort's Achievement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
18.	Willingness to Recommend: Cohort's Achievement Threshold	Character	Willingness to Recommend the Agency (HHCAHPS Survey-based): The cohort's Achievement Threshold for this measure.
19.	Footnote Willingness to Recommend: Cohort's Achievement Threshold	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
20.	Discharged to Community: Cohort's Benchmark	Character	Discharged to Community (OASIS-based): The cohort's Benchmark.
21.	Dyspnea: Cohort's Benchmark	Character	Improvement in Dyspnea (OASIS-based): The cohort's Benchmark for this measure.
22.	Oral Medications: Cohort's Benchmark	Character	Improvement in Management of Oral Medications (OASIS-based): The cohort's Benchmark.
23.	TNC Mobility: Cohort's Benchmark	Character	Total Normalized Composite Change in Mobility (OASIS-based): The cohort's Benchmark for this measure.
24.	TNC Self-Care: Cohort's Benchmark	Character	Total Normalized Composite Change in Self-Care (OASIS-based): The cohort's Benchmark for this measure.
25.	ACH: Cohort's Benchmark	Character	Acute Care Hospitalization During the First 60 Days of Home Health (claims-based): The cohort's Benchmark for this measure.
26.	ED Use: Cohort's Benchmark	Character	Emergency Department Use without Hospitalization During the First 60 Days of Home Health (claims-based): The cohort's Benchmark for this measure.
27.	Care of Patients: Cohort's Benchmark	Character	Care of Patients (HHCAHPS Survey-based): The cohort's Benchmark for this measure.
28.	Footnote Care of Patients: Cohort's Benchmark	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
29.	Communication: Cohort's Benchmark	Character	Communication Between Providers and Patients (HHCAHPS Survey-based): The cohort's Benchmark for this measure.
30.	Footnote Communication: Cohort's Benchmark	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
31.	Specific Care Issues: Cohort's Benchmark	Character	Specific Care Issues (HHCAHPS-Survey-based): The cohort's Benchmark for this measure.

Column Number	Variable Name	Variable Type	Description
32.	Footnote Specific Care Issues: Cohort's Benchmark	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
33.	Overall Rating: Cohort's Benchmark	Character	Overall Rating of Home Health Care (HHCAHPS-Survey-based): The cohort's Benchmark for this measure.
34.	Footnote Overall Rating: Cohort's Benchmark	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
35.	Willingness to Recommend: Cohort's Benchmark	Character	Willingness to Recommend the Agency (HHCAHPS Survey-based): The cohort's Benchmark for this measure.
36.	Footnote Willingness to Recommend: Cohort's Benchmark	Character	If the metric is dashed (-) or not available (NA), the reason the metric was not calculated is explained here.
37.	Cohort's Linear Exchange Function (LEF) Ratio	Character	The home health agency's cohort's Linear Exchange Function (LEF) Ratio.
38.	Cohort's Average Total Performance Score (TPS)	Character	The average Total Performance Score of all HHAs in the cohort to which the HHA was assigned, weighted by home health agencies' Medicare Fee-for-Service (FFS) claims in the calendar year prior to the payment year.
39.	Cohort's Average Adjusted Payment Percentage (APP)	Character	The average Final TPS-Adjusted Payment Percentage (APP) of all HHAs in the cohort to which the HHA was assigned, weighted by home health agencies' Medicare Fee-for-Service (FFS) claims in the calendar year prior to the payment year.

Table 14: Footnote Details

Footnote	Description
1	This agency provides services under a federal waiver program to non-traditional, chronic long term population.
2	This agency provides services to a special needs population.
3	Not Available.
4	The number of patient episodes for this measure is too small to report.
5	This measure currently does not have data or provider has been certified/recertified for less than 6 months.
6	The national average for this measure is not provided because of state-to-state differences in data collection.
7	Medicare is not displaying rates for this measure for any home health agency, because of an issue with the data.
8	There were problems with the data and they are being corrected.
9	Zero, or very few, patients met the survey's rules for inclusion. The scores shown, if any, reflect a very small number of surveys and may not accurately tell how an agency is doing.
10	Survey results are based on less than 12 months of data.
11	Fewer than 70 patients completed the survey. Use the scores shown, if any, with caution as the number of surveys may be too low to accurately tell how an agency is doing.
12	No survey results are available for this period.
13	Data suppressed by CMS for one or more quarters.
14*	No or insufficient data available. Measures with no or insufficient data available are excluded from the TPS calculation.
15*	HHA ineligible to receive an APR due to Medicare certification date and/or no or insufficient data on at least five measures to calculate a Total Performance Score (TPS).
16*	Achievement Thresholds and Benchmarks are not calculated for HHCAHPS Survey-based measures for HHAs in the smaller-volume cohort.

* Footnote applies to HHVBP only.

Appendix A: Anticipated Home Health Refreshes and Data Collection Periods

This table provides the data collection timeframes for HHA quality measures displayed on Medicare.gov for July 2025 – April 2026. The first column displays the plain-language measure name used on Medicare.gov, the second column displays the full technical measure name, the third column displays the reporting cycle which describes the collection period and refresh frequency, and the last columns contain the timeframe for each quarterly website refresh. Periods of performance are subject to change.

Measure Name displayed on Medicare.gov	Technical Measure Name (CMS Measure ID)	Data Collection Periods and Reporting Frequency	Data Collection Timeframes Displayed on Medicare.gov			
			July 2025	October 2025	January 2026	April 2026
OASIS-Based Measures						
How often patients got better at walking or moving around	Improvement in Ambulation/Locomotion	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025
How often patients got better at getting in and out of bed	Improvement in Bed Transferring	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025
How often patients got better at bathing	Improvement in Bathing	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025
How often patients were at or above an expected ability to care for themselves and move around at discharge	Discharge Function Score	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025
How often patients' breathing improved	Improvement in Dyspnea	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025

How often patients have pressure ulcers/pressure injuries that are new or worsened	Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury - HH	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025
How often the home health team made sure that their patients have received a flu shot for the current flu season	Influenza Immunization Received	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025
How often patients got better at taking their drugs correctly by mouth	Improvement in Management of Oral Medication	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025
How often the home health team checked patients' medications and got doctor's orders for medication issues in a timely manner	Drug Regimen Review Conducted with Follow-Up for Identified Issues	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025
How often the home health team began their patients' care in a timely manner	Timely Initiation of Care	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025
How often patients experienced one or more falls with a major injury	Application of Percent of Residents Experiencing One or More Falls with Major Injury	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025
How often the home health agency reviewed and provided a medication list to the patient, family, and/or caregiver at final discharge	Transfer of Health Information to Provider - Post-Acute Care	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025

How often the home health agency reviewed and provided a medication list to the next healthcare setting	Transfer of Health Information to Provider - Post-Acute Care	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q4 2023 - Q3 2024	Q1 2024 - Q4 2024	Q2 2024 – Q1 2025	Q3 2024 – Q2 2025
TBD	COVID-19 Vaccine: Percent of Patients Who Are Up to Date	Collection period: 3 months	N/A	N/A	Q1 2025	N/A
Claims-Based Measures						
How often patients remained at home within 31 days of being discharged from home health	Discharge to Community - Post Acute Care Home Health Quality Reporting Program	Collection period: 24 months. Refreshed annually.	Q1 2022 – Q4 2023	Q1 2023 – Q4 2024	Q1 2023 – Q4 2024	Q1 2023 – Q4 2024
How often patients were re-admitted to the hospital for a potentially-preventable condition after discharge from home health	Home Health Within-Stay Potentially Preventable Hospitalization	Collection period: 12 months. Refreshed annually.	Q1 2023 – Q4 2023	Q1 2024 – Q4 2024	Q1 2024 – Q4 2024	Q1 2024 – Q4 2024
How often patients were admitted to the hospital for a potentially preventable condition while receiving home health care	Potentially Preventable 30-Day Post-Discharge Readmission Measure - Claims-based for HH QRP	Collection period: 36 months. Refreshed annually.	Q1 2021 – Q4 2023	Q1 2022 – Q4 2024	Q1 2022 – Q4 2024	Q1 2022 – Q4 2024
How much Medicare spends on an episode of care at this agency, compared to Medicare spending across all agencies nationally	Medicare Spending Per Beneficiary - Post Acute Care Home Health	Collection Period: 24 months. Refreshed annually.	Q1 2022 – Q4 2023	Q1 2023 – Q4 2024	Q1 2023 – Q4 2024	Q1 2023 – Q4 2024
HHCAHPS Measures						

How often the home health team gave care in a professional way	Care of Patients Composite	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q1 2024 - Q4 2024	Q2 2024 - Q1 2025	Q3 2024 – Q2 2025	Q4 2024 – Q3 2025
How well did the home health team communicate with patients	Communications Between Providers and Patients Composite	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q1 2024 - Q4 2024	Q2 2024 - Q1 2025	Q3 2024 – Q2 2025	Q4 2024 – Q3 2025
Did the home health team discuss medicines, pain, and home safety with patients	Specific Care Issues Composite	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q1 2024 - Q4 2024	Q2 2024 - Q1 2025	Q3 2024 – Q2 2025	Q4 2024 – Q3 2025
How do patients rate the overall care from the home health agency	Overall Rating of Care Received	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q1 2024 - Q4 2024	Q2 2024 - Q1 2025	Q3 2024 – Q2 2025	Q4 2024 – Q3 2025
Would patients recommend the home health agency to friends and family	Willingness to Recommend Rating	Collection period: Four rolling quarters (12 months). Refreshed quarterly.	Q1 2024 - Q4 2024	Q2 2024 - Q1 2025	Q3 2024 – Q2 2025	Q4 2024 – Q3 2025

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