

System Requirements Specification Centers for Medicare & Medicaid Services

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

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Document Purpose

The purpose of this document is to identify the requirements for maintenance and support of the Hospital Compare Downloadable Databases, which can be found by clicking the following link: https://data.medicare.gov.

Background

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

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

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

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

Hospital Compare Measures Description/Background and Reporting CyclesData is collected in differing timeframes from the various quality measurement contractors. Below is a brief description of the collection process and report timing for each measure set.

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

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

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

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

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

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

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

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

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

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

Name	Hospital-Acquired Conditions (HACs)
Description/	The Hospital-Acquired Conditions (HACs) measures were retired from the IQR program;
Background	however, CMS will continue to publicly report the rates under the HAC ACA 3008 provision on
	Data.Medicare.gov. The HACs data will not be refreshed for the July 2013 Hospital Compare
	release.
Reporting	The collection period for the HAC measures is 24 months. The HAC measures are typically
Cycle	refreshed annually.

Data Collection Period Information

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

Measure	Measure	Measure	Measure	Measure
Code	Start Quarter	Start Date	End Quarter	End Date
AMI-10	2Q2011	4/1/2011	1Q2012	3/31/2012
AMI-2	2Q2011	4/1/2011	1Q2012	3/31/2012
AMI-7a	2Q2011	4/1/2011	1Q2012	3/31/2012
AMI-8a	2Q2011	4/1/2011	1Q2012	3/31/2012
CAC-1	2Q2011	4/1/2011	1Q2012	3/31/2012
CAC-2	2Q2011	4/1/2011	1Q2012	3/31/2012
CAC-3	2Q2011	4/1/2011	1Q2012	3/31/2012
Composite 6				
(Q19 & Q20)	2Q2011	4/1/2011	1Q2012	3/31/2012
ED-1b	1Q2012	1/1/2012	1Q2012	3/31/2012
ED-2b	1Q2012	1/1/2012	1Q2012	3/31/2012
HAC-1	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-2	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-3	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-4	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-5	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-6	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-7	3Q2009	7/1/2009	2Q2011	6/30/2011
HAC-8	3Q2009	7/4/0019	20201	6/30/2011
. one-vice.		9 1/2011	TQ2012	3/31/2012
SCIP-VTE-2	2Q2011	4/1/2011	1Q2012	3/31/2012

Access Downloadable File Contents

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

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

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

MSAccess file name:	
Hospital.zip	
Hospital.pdf	
Readme.txt	
Access Table Names	
dbo_vwHQI_HOSP	
vwMeasure_Dates	
dbo_vwHQI_FTNT	
vwHQI_HOSP_AHRQ	
vwHQI_HOSP_AHRQ_STATE	
vwHQI_HOSP_AHRQ_NATIONAL	
dbo_vwHQI_HOSP_ED	
vwHQI_HOSP_ED_State	
vwHQI_HOSP_ED_National	
vwHQI_HOSP_HAC	
vwHQI_HOSP_HAC_NATIONAL	
vwHQI_HOSP_HAI	
vwHQI_HOSP_HAI_STATE	
vwHQI_HOSP_HAI_National	
dbo_vwHQI_HOSP_HCAHPS_MSR	
dbo_vwHQI_STATE_HCAHPS_MSR	
dbo_vwHQI_US_NATIONAL_HCAHPS_MSR	
Hvbp_ami_02_07_2013	
Hvbp_hai_02_07_2013	
Hvbp_hcahps_02_07_2013	
Hvbp_hf_02_07_2013	
Hognital July 20120702	Page 8 of 70

MSAccess file name:
Hospital.zip
Hospital.pdf
Readme.txt
Access Table Names
Hvbp_pn_02_07_2013
Hvbp_scip_02_07_2013
Hvbp_tps_02_07_2013
dbo_vwHQI_HOSP_IMG_XWLK
dbo_vwHQI_STATE_IMG_AVG
dbo_vwHQI_US_NATIONAL_IMG_AVG
dbo_vwHQI_HOSP_IMM
vwHQI_HOSP_IMM_State
vwHQI_HOSP_IMM_National
dbo_vwHQI_HOSP_MORTALITY_READM_XWLK
dbo_vwHQI_STATE_MORTALITY_READM_SCRE
dbo_vwHQI_US_NATIONAL_MORTALITY_READM_RATE
dbo_vwHQI_HOSP_MPV_MSR
dbo_vwHQI_STATE_MPV_MSR
dbo_vwHQI_US_NATIONAL_MPV_MSR
vwHQI_HOSP_SPP
dbo_vwHQI_HOSP_SPP_State
dbo_vwHQI_HOSP_SPP_National
dbo_vwHQI_HOSP_STRUCTURAL_XWLK
vwHQI_READM_REDUCTION
dbo_vwHQI_HOSP_MSR_XWLK
dbo_vwHQI_STATE_MSR_AVG
dbo_vwHQI_US_National_MSR_AVG
dbo_vwHQI_PCTL_MSR_XWLK

Access Data Content Summary

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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP	Hospital Characteristics
Description	General information on hospitals within the o	lataset
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address1		Memo
Address2		Memo
Address3		Memo
City		Memo
State	·	Text(2)

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Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP	Hospital Characteristics
Description	General information on hospitals within the	dataset
Column Name		DDB Data Type
ZIP Code		Text(5)
County Name		Text(25)
Phone Number		Text(10)
Hospital Type		Text(50)
Hospital Ownership		Text(100)
Emergency Service		Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwMeasure_Dates	Measure Data Collection Periods
Description	Current collection dates for available measures included in the Downloadable Database	
Column Name		DDB Data Type
msr_cd		Memo
msr_strt_qtr		Memo
msr_strt_dt		Memo
msr_end_qtr		Memo
msr_end_dt		Memo

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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_AHRQ	AHRQ PSI Hospital Results
Description	AHRQ PSI measures hospital-level results	
Column Name		DDB Data Type
Prvdr_id		Memo
PSI_4_SURG_COM	IP .	Memo
PSI_4_SURG_COM	IP_F	Memo
PSI_6_IAT_PTX		Memo
PSI_6_IAT_PTX_F		Memo
PSI_12_POSTOP_PULMEMB_DVT		Memo
PSI_12_POSTOP_PULMEMB_DVT_F		Memo
PSI_14_POSTOP_DEHIS		Memo
PSI_14_POSTOP_DEHIS_F		Memo
PSI_15_ACC_LAC		Memo
PSI_15_ACC_LAC_F		Memo
PSI_90_SAFETY		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_AHRQ	AHRQ PSI Hospital Results
Description AHRQ PSI measures hospital-level results		
Column Name		DDB Data Type
PSI_90_SAFETY_F	7	Memo
PSI_4_SURG_COM	IP_NUM_DC	Memo
PSI_4_SURG_COM	IP_RATE	Memo
PSI_4_SURG_COM	IP_LOW_EST	Memo
PSI_4_SURG_COM	IP_HIGH_EST	Memo
PSI_6_IAT_PTX_N	TUM_DC	Memo
PSI_6_IAT_PTX_R	ATE	Memo
PSI_6_IAT_PTX_L	OW_EST	Memo
PSI_6_IAT_PTX_H	IGH_EST	Memo
PSI_12_POSTOP_P	PULMEMB_DVT_NUM_DC	Memo
PSI_12_POSTOP_P	PULMEMB_DVT_RATE	Memo
	PULMEMB_DVT_LOW_EST	Memo
	PULMEMB_DVT_HIGH_EST	Memo
PSI_14_POSTOP_D		Memo
PSI_14_POSTOP_D	DEHIS_RATE	Memo
PSI_14_POSTOP_D	DEHIS_LOW_EST	Memo
PSI_14_POSTOP_D	DEHIS_HIGH_EST	Memo
PSI_15_ACC_LAC	_NUM_DC	Memo
PSI_15_ACC_LAC	_RATE	Memo
PSI_15_ACC_LAC_LOW_EST		Memo
PSI_15_ACC_LAC_HIGH_EST		Memo
PSI_90_SAFETY_NUM_DC		Memo
PSI_90_SAFETY_RATE		Memo
PSI_90_SAFETY_LOW_EST		Memo
PSI_90_SAFETY_F	HIGH_EST	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_AHRQ_STATE	AHRQ PSI State Results
Description	AHRQ PSI measures state-level results	
Column Name		DDB Data Type
State		Memo
PSI_4_SURG_COM	IP_WORSE	Memo
PSI_4_SURG_COM	IP_SAME	Memo
PSI_4_SURG_COM	IP_BETTER	Memo
PSI_4_SURG_COM	IP_TOOFEW	Memo
PSI_6_IAT_PTX_W	VORSE	Memo
PSI_6_IAT_PTX_S	AME	Memo
PSI_6_IAT_PTX_BETTER		Memo
PSI_6_IAT_PTX_TOOFEW		Memo
PSI_12_POSTOP_PULMEMB_DVT_WORSE		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_AHRQ_STATE	AHRQ PSI State Results
Description	AHRQ PSI measures state-level results	
Column Name		DDB Data Type
PSI_12_POSTOP_P	ULMEMB_DVT_SAME	Memo
PSI_12_POSTOP_P	ULMEMB_DVT_BETTER	Memo
PSI_12_POSTOP_P	ULMEMB_DVT_TOOFEW	Memo
PSI_14_POSTOP_D	DEHIS_WORSE	Memo
PSI_14_POSTOP_D	DEHIS_SAME	Memo
PSI_14_POSTOP_D	DEHIS_BETTER	Memo
PSI_14_POSTOP_D	DEHIS_TOOFEW	Memo
PSI_15_ACC_LAC	_WORSE	Memo
PSI_15_ACC_LAC	_SAME	Memo
PSI_15_ACC_LAC	_BETTER	Memo
PSI_15_ACC_LAC	_TOOFEW	Memo
PSI_90_SAFETY_V	VORSE	Memo
PSI_90_SAFETY_S	AME	Memo
PSI_90_SAFETY_E	BETTER	Memo
PSI_90_SAFETY_T	COOFEW	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_AHRQ_NATIONAL	AHRQ PSI National Results
Description	AHRQ PSI measures national results	
Column Name		DDB Data Type
MSR_CD		Memo
NATIONAL		Memo
PSI_NATIONAL_S	CR	Memo

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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_ED_State	Process of Care — Emergency Department
		State Results
Description	Process of Care—Emergency Department me	easures state-level results
Column Name		DDB Data Type
prvdr_id		Memo
msr_cd		Memo
scr		Memo
footnote		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_ED_National	Process of Care — Emergency Department
		National Results
Description	Process of Care—Emergency Department measures national results	
Column Name		DDB Data Type
prvdr_id		Memo
msr_cd		Memo
scr		Memo
footnote		Memo

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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_HAC_NATIONAL	Hospital-Acquired Conditions National
		Results
Description	Hospital-Acquired Conditions measures national results	
Column Name	DDB Data Type	
msr_cd	Memo	
scr		Memo

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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_HAI_STATE	Healthcare-Associated Infections State
		Results
Description	Healthcare-Associated Infections measures state-level results	
Column Name		DDB Data Type
state		Memo
msr_cd		Memo
scr		Memo
footnote		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_HAI_National	Healthcare-Associated Infections National
		Results
Description	Healthcare-Asssicoated Infections measures n	national results
Column Name		DDB Data Type
prvdr_id		Memo
msr_cd		Memo
scr		Memo
footnote		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_HCAHPS_MSR	HCAHPS Hospital Results
Description	HCAHPS measures hospital-level results	
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
State		Text(2)
HCAHPS Measure (Code	Text(25)
HCAHPS Question		Memo
HCAHPS Answer D	escription	Memo
HCAHPS Answer Percent		Text(50)
Number of Complete	ed Surveys	Text(50)
Survey Response Ra	te Percent	Text(50)
Footnote		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_STATE_HCAHPS_MSR	HCAHPS State Results
Description	HCAHPS measures state-level results	
Column Name		DDB Data Type
State		Text(50)
HCAHPS Question		Memo
HCAHPS Measure (Code	Text(25)
HCAHPS Answer D	escription	Memo
HCAHPS Answer P	ercent	Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_US_NATIONAL_HCAHPS_	HCAHPS National Results
	MSR	
Description	HCAHPS measures national results	
Column Name		DDB Data Type
HCAHPS Measure (Code	Text(25)
HCAHPS Question		Memo
HCAHPS Answer D	escription	Memo
HCAHPS Answer Percent		Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_ami _02_07_2013	HVBP Process of Care—AMI Results
Description	Hospital Value-Based Purchasing Acute Myo	ocardial Infarction results
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
State		Memo
ZIP Code		Memo
County Name		Memo
AMI-7a Performanc	e Rate	Memo
AMI-7a Achievemen	nt Points	Memo
AMI-7a Improvement Points		Memo
AMI-7a Measure Sc	ore	Memo
AMI-8a Performance Rate		Memo
AMI-8a Achievement Points		Memo
AMI-8a Improveme	nt Points	Memo
AMI-8a Measure Sc	ore	Memo
AMI Condition/Proc	cedure Score	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_hai_02_07_2013	HVBP Healthcare-Associated Infections
		Results
Description	Hospital Value-Based Purchasin	g Healthcare-Associated Infections results
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
State		Memo
ZIP Code		Memo
County Name		Memo
SCIP-Inf-1 Performa	ance Rate	Memo
SCIP-Inf-1 Achieve	ment Points	Memo
SCIP-Inf-1 Improvement Points		Memo
SCIP-Inf-1 Measure Score		Memo
SCIP-Inf-2 Performance Rate		Memo
SCIP-Inf-2 Achievement Points		Memo
SCIP-Inf-2 Improve		Memo
SCIP-Inf-2 Measure		Memo
SCIP-Inf-3 Performa		Memo
SCIP-Inf-3 Achieve		Memo
SCIP-Inf-3 Improve		Memo
SCIP-Inf-3 Measure		Memo
SCIP-Inf-4 Perform		Memo
SCIP-Inf-4 Achieve		Memo
SCIP-Inf-4 Improvement Points		Memo
SCIP-Inf-4 Measure Score		Memo
HAI Condition/Proc	edure Score	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_hcahps_02_07_2013	HVBP HCAHPS Results
Description	Hospital Value-Based Purchasing HCAHPS r	results
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
State		Memo
ZIP Code		Memo
County Name		Memo
Communication with	n Nurses Achievement Points	Memo
Communication with	n Nurses Improvement Points	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_hcahps_02_07_2013	HVBP HCAHPS Results
Description	Hospital Value-Based Purchasing HCAHPS r	results
Column Name		DDB Data Type
Communication with	n Nurses Dimension Score	Memo
	n Doctors Achievement Points	Memo
Communication with	n Doctors Improvement Points	Memo
Communication with	n Doctors Dimension Score	Memo
Responsiveness of H	Iospital Staff Achievement Points	Memo
	Iospital Staff Improvement Points	Memo
Responsiveness of H	Iospital Staff Dimension Score	Memo
Pain Management A	chievement Points	Memo
Pain Management In	nprovement Points	Memo
Pain Management D	imension Score	Memo
Communication abo	ut Medicines Achievement Points	Memo
Communication about Medicines Improvement Points		Memo
Communication about Medicines Dimension Score		Memo
Cleanliness and Quietness of Hospital Environment Achievement		Memo
Po		
Cleanliness and Quietness of Hospital Environment Improvement		Memo
Po		
Cleanliness and Quie	etness of Hospital Environment Dimension	Memo
Scor		
	on Achievement Points	Memo
	on Improvement Points	Memo
Discharge Information Dimension Score		Memo
Overall Rating of Hospital Achievement Points		Memo
Overall Rating of Hospital Improvement Points		Memo
Overall Rating of Hospital Dimension Score		Memo
HCAHPS Base Score		Memo
HCAHPS Consisten	cy Score	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_hf_02_07_2013	HVBP Process of Care—Heart Failure
		Results
Description	Hospital Value-Based Purchasing Process of	Care—Heart Failure results
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
State		Memo
ZIP Code		Memo
County Name		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_hf_02_07_2013	HVBP Process of Care—Heart Failure
		Results
Description	Hospital Value-Based Purchasing Process of	Care—Heart Failure results
Column Name		DDB Data Type
HF-1 Performance Ra	ate	Memo
HF-1 Achievement P	oints	Memo
HF-1 Improvement P	oints	Memo
HF-1 Measure Score		Memo
HF-1 Condition/Proc	edure Score	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_pn_02_07_2013	HVBP Process of Care—Pneumonia
		Results
Description	Hospital Value-Based Purchasing Process of	of Care—Pneumonia measure results
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
State		Memo
ZIP Code		Memo
County Name		Memo
PN-3b Performance	Rate	Memo
PN-3b Achievement Points		Memo
PN-3b Improvement	t Points	Memo
PN-3b Measure Scor	re	Memo
PN-6 Performance Rate		Memo
PN-6 Achievement Points		Memo
PN-6 Improvement Points		Memo
PN-6 Measure Score		Memo
PN Condition/Procedure Score		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_scip_02_07_2013	HVBP Process of Care—Surgical
		Improvement Care Program Results
Description	Hospital Value-Based Purchasing Process of	Care—Surgical Improvement Care Program
	results	
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_scip_02_07_2013	HVBP Process of Care—Surgical
		Improvement Care Program Results
Description	Hospital Value-Based Purchasing Process of	Care—Surgical Improvement Care Program
	results	
Column Name		DDB Data Type
State		Memo
ZIP Code		Memo
County Name		Memo
SCIP-Card-2 Performance Rate		Memo
SCIP-Card-2 Achievement Points		Memo
SCIP-Card-2 Improvement Points		Memo
SCIP-Card-2 Measure Score		Memo
SCIP-VTE-1 Performance Rate		Memo
SCIP-VTE-1 Achievement Points		Memo
SCIP-VTE-1 Improv	vement Points	Memo
SCIP-VTE-1 Measure Score		Memo
SCIP-VTE-2 Performance Rate		Memo
SCIP-VTE-2 Achievement Points		Memo
SCIP-VTE-2 Improvement Points		Memo
SCIP-VTE-2 Measure Score		Memo
SCIP Condition/Procedure Score		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_tps_02_07_2013	HVBP Total Performance Score Results
Description	Overall performance score for Hospital Value	e-Based Purchasing
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
State		Memo
ZIP Code		Memo
County Name		Memo
Unweighted Normalized Clinical Process of Care Domain Score		Memo
Weighted Clinical Process of Care Domain Score		Memo
Unweighted Patient Experience of Care Domain Score		Memo
Weighted Patient Experience of Care Domain Score		Memo
Total Performance S	core	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_IMG_XWLK	Outpatient Imaging Efficiency Hospital
		Results
Description	Outpatient Imaging Efficiency measures hosp	oital-level results
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
State		Text(2)
Condition		Text(22)
Measure Code		Text(25)
Measure Name		Memo
Score		Text(50)
Sample		Text(50)
Footnote		Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_STATE_IMG_AVG	Outpatient Imaging Efficiency State
		Results
Description	Outpatient Imaging Efficiency measures state	e-level results
Column Name		DDB Data Type
State		Text(50)
Condition		Text(22)
Measure Code		Text(25)
Measure Name		Memo
Score		Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_US_NATIONAL_IMG_AVG	Outpatient Imaging Efficiency National
		Results
Description	Outpatient Imaging Efficiency measures nation	onal results
Column Name		DDB Data Type
Condition		Text(22)
Measure Code		Text(25)
Measure Name		Memo
Score		Text(50)

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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_IMM	Process of Care — Immunization Hospital
		Results
Description	Process of Care—Immunization measures ho	spital-level results
Column Name		DDB Data Type
scr		Memo
footnote		Memo
Sample		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_IMM_State	Process of Care — Immunization State
		Results
Description	Process of Care—Immunization measures sta	te-level results
Column Name		DDB Data Type
prvdr_id		Memo
msr_cd		Memo
scr		Memo
footnote		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_IMM_National	Process of Care — Immunization National
		Results
Description	Process of Care — Immunization measures n	ational results
Column Name		DDB Data Type
prvdr_id		Memo
msr_cd		Memo
scr		Memo
footnote		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_MORTALITY_READ	30-Day Mortality and Readmission
	M_XWLK	Hospital Results
Description	30-Day Mortality and Readmission measures	hospital-level results
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
State		Text(2)
Condition		Text(13)
Measure Name		Memo
Mortality_Readm Rate		Text(50)
Comparison to National Rate		Text(50)
Lower Mortality_Readm Estimate		Text(50)
Upper Mortality_Readm Estimate		Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_MORTALITY_READ	30-Day Mortality and Readmission
	M_XWLK	Hospital Results
Description	30-Day Mortality and Readmission measures hospital-level results	
Column Name		DDB Data Type
Number of Patients		Text(50)
Footnote		Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_STATE_MORTALITY_REA	30-Day Mortality and Readmission State
	DM_SCRE	Results
Description	30-Day Mortality and Readmission measures	state-level results
Column Name		DDB Data Type
State		Text(50)
Condition		Memo
Measure Name		Memo
Category		Text(36)
Number of Hospitals	3	Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_US_NATIONAL_MORTALI	30-Day Mortality and Readmission
	TY_READM_RATE	National Results
Description	30-Day Mortality and Readmission measures	national results
Column Name		DDB Data Type
Condition		Memo
Measure Name		Memo
National Mortality_I	Readm Rate	Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_MPV_MSR	Medicare Volume Hospital Results
Description	Medicare Volume measures hospital-level res	sults
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
State		Text(2)
Diagnosis Related Group ID		Text(25)
Diagnosis Related Group Name		Memo
Number Of Cases		Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_STATE_MPV_MSR	Medicare Volume State Results
Description	Medicare Volume measures state-level result	ts
Column Name		DDB Data Type
State		Text(50)
Diagnosis Related Group ID		Text(25)
Diagnosis Related Group Name		Memo
Number Of Cases		Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_US_NATIONAL_MPV_MSR	Medicare Volume National Results
Description	Medicare Volume measures national results	
Column Name		DDB Data Type
State		Text(50)
Diagnosis Related Group ID		Text(25)
Diagnosis Related Group Name		Memo
Number Of Cases		Text(50)

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

Table Name Physical: Access		Business	
(<u>Back to Table Listing</u>) dbo_vwHQI_HOSP_SPP_State		Medicare Spending Per Patient State	
		Results	
Description	Medicare Spending Per Patient measure state-level results		
Column Name	DDB Data Type		
prvdr_id	prvdr_id Memo		
msr_cd Memo		Memo	
scr		Memo	
ftnt value		Memo	

Table Name	Physical: Access	Business	
(Back to Table Listing) dbo_vwHQI_HOSP_SPP_National		Medicare Spending Per Patient National	
		Results	
Description	Medicare Spending Per Patient measure national results		
Column Name	Name DDB Data Type		
prvdr_id		Memo	
msr_cd	nsr_cd Memo		
scr		Memo	
ftnt_value		Memo	

Table Name Physical: Access		Business		
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_STRUCTURAL_XW	Structural Hospital Results		
	LK			
Description	Structural measures hospital-level results			
Column Name		DDB Data Type		
Provider Number		Memo		
Hospital Name		Memo		
State		Text(2)		
Measure Code		Text(25)		
Measure Name		Memo		
Measure Response		Text(50)		

Table Name	Physical: Access	Business	
(<u>Back to Table Listing</u>)	vwHQI_READM_REDUCTION	Readmission Reduction Hospital Results	
Description	Readmission Reduction measures hospital-level results		
Column Name		DDB Data Type	
Hospital Name		Text(255)	
Provider Number		Text(255)	
State		Text(255)	
Measure Name		Text(255)	
Number of Discharges		Text(255)	
Footnote		Text(255)	
Excess Readmission Ratio		Text(255)	
Predicted Readmissi	on Rate	Text(255)	
Expected Readmission Rate		Text(255)	
Number of Readmissions		Text(255)	
Start Date		Text(255)	
End Date		Text(255)	

Table Name	Physical: Access	Business		
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_MSR_XWLK	Process of Care Hospital Results		
Description	Process of Care measures hospital-level resul	ts		
Column Name		DDB Data Type		
Provider Number		Memo		
Hospital Name	Memo			
State	Text(2)			
Condition	Memo			
Measure Code	e Code Text(25)			
Measure Name		Memo		
Score		Text(50)		
Sample	Sample Text(50)			
Footnote	Memo			

Table Name	Physical: Access	Business		
(<u>Back to Table Listing</u>)	dbo_vwHQI_STATE_MSR_AVG	Process of Care State Results		
Description	Process of Care measures state-level results			
Column Name	DDB Data Type			
State		Text(50)		
Condition		Memo		
Measure Name		Memo		
Measure Code		Text(25)		
Score		Text(50)		

Table Name	Physical: Access	Business		
(<u>Back to Table Listing</u>)	dbo_vwHQI_US_National_MSR_AVG	Process of Care National Results		
Description	Process of Care measures national results			
Column Name		DDB Data Type		
Provider Number		Text(50)		
Condition		Text(33)		
Measure Name		Memo		
Score		Text(50)		

Table Name	Physical: Access	Business	
(<u>Back to Table Listing</u>)	dbo_vwHQI_PCTL_MSR_XWLK	Process of Care Top Percentile Scores	
Description	Scores achieved by the top ten (10) percent of	f hospitals and the national average score for	
_	each Process of Care measure		
Column Name		DDB Data Type	
Measure Name		Memo	
Condition		Memo	
Measure Code		Text(25)	
Percentile		Text(68)	
Score		Text(50)	

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

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

CSV Revised file name:	Data.Medicare.gov	
Hospital_Revised_flatfiles.zip		
Hospital.pdf		
readme.txt		
CSV Revised Data File Names (.csv)	Data.Medicare.gov File Names	
Hospital_Data	Hospital General Information	
Measure Dates	Measure Dates	
FootNote	Hospital Footnote Crosswalk	
ACS NSQIP Data File - April 2013	Hospital ACS Measures	
Agency for Healthcare Research and Quality	Agency for Healthcare Research and Quality Measures	
Agency for Healthcare Research and Quality - State	Agency for Healthcare Research and Quality - State Measures	
Agency for Healthcare Research and Quality - National	Agency for Healthcare Research and Quality - National Measures	
Emergency Department Throughput	Emergency Department Care Measures	
Emergency Department Throughput-State	Emergency Department Care Measures - State	
Emergency Department Throughput-National	Emergency Department Care Measures - National	
Healthcare_Associated_Infections	Healthcare Associated Infections	
Healthcare_Associated_Infections_State	Healthcare Associated Infections - State Measures	
Healthcare_Associated_Infections_National	Healthcare Associated Infections National	
Hospital Acquired Condition	Hospital Acquired Condition Measures	
Hospital Acquired Condition - National	Hospital Acquired Condition - National Measures	
HCAHPS Measures	Survey of Patients' Hospital Experiences (HCAHPS)	
HCAHPS Measures - State	Survey of Patients' Hospital Experiences (HCAHPS) - State Average	
HCAHPS Measures - National	Survey of Patients' Hospital Experiences (HCAHPS) - National Average	
hvbp_ami_02_07_2013	Hospital Value-Based Purchasing (HVBP) – Acute Myocardial Infarction Scores	
hvbp_hai_02_07_2013	Hospital Value-Based Purchasing (HVBP) – Healthcare-Associated Infection Scores	
hvbp_hcahps_02_07_2013	Hospital Value-Based Purchasing (HVBP) – Patient Experience of Care Domain Scores (HCAHPS)	
hvbp_hf_02_07_2013 Hospital Value-Based Purchasing (HVBP) – Failure Scores		
hvbp_pn_02_07_2013 Hospital Value-Based Purchasing (HVBP) Pneumonia Scores		
hvbp_scip_02_07_2013	Hospital Value-Based Purchasing (HVBP) – Surgical Care Improvement Project Scores	

CSV Revised file name:	Data.Medicare.gov	
Hospital_Revised_flatfiles.zip		
hvbp_tps_02_07_2013	Hospital Value-Based Purchasing (HVBP) – Total	
	Performance Scores	
Immunization	Preventive Care Measures	
Immunization-State	Preventive Care Measures - State	
Immunization-National	Preventive Care Measures - National	
Medicare Spending Per Patient	Medicare Spending Per Patient	
Medicare Spending Per Patient - State	Medicare Spending Per Patient - State	
Medicare Spending Per Patient - National	Medicare Spending Per Patient - National	
	Spending Breakdown by Claim	
Medicare Volume Measures	Hospital Medicare Volume Measures	
Medicare Volume Measures - State	Hospital Medicare Volume Measures - State Average	
Medicare Volume Measures - National	Hospital Medicare Volume Measures - National	
	Average	
Outcome of Care Measures	Hospital Outcome Of Care Measures	
Outcome of Care Measures - State	Hospital Outcome Of Care Measures - State	
Outcome of Care Measures - National	Hospital Outcome Of Care Measures - National	
	Average	
Outpatient Imaging Efficiency Measures	Use Of Medical Imaging Measures	
Outpatient Imaging Efficiency Measures - State	Use Of Medical Imaging Measures - State	
Outpatient Imaging Efficiency Measures - National	Use Of Medical Imaging Measures - National	
Process of Care Measures - Children	Hospital Process of Care Measures - Children's Asthma	
Process of Care Measures - Heart Attack	Hospital Process of Care Measures - Heart Attack	
Process of Care Measures - Heart Failure	Hospital Process of Care Measures - Heart Failure	
Process of Care Measures - Pneumonia	Hospital Process of Care Measures - Pneumonia	
Process of Care Measures - SCIP	Hospital Process of Care Measures - Surgical Care	
	Improvement Project	
Process of Care Measures - State	Hospital Process of Care Measures - State Average	
Process of Care Measures - National	Hospital Process of Care Measures - National	
	Average	
READMISSION REDUCTION	Hospital Readmission Reduction	
Structural Measures	Hospital Structural Measures - Cardiac Surgery	
	Registry	
Measure Crosswalk		
	Hospital Compare - CASPER/ASPEN Contacts	

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

Note: Opening CSV files in Excel will remove leading zeros from data fields. Since some data, such as provider numbers, contain leading zeros, it is recommended that you open CSV files using text editor programs such as Notepad to copy or view CSV file content. Fields having the data type of "memo" do not require a length. They allow the user to input large amounts of text without limit. Fields having the data type of "Text" require the corresponding length provided.

Table Name	Physical: Revised CSV		Physical: Busines		ss	
(<u>Back to Table Listing</u>)			Data.Medicare.gov			
	Hospital_Data		Hospital General	Hospital	Characteristics	
			Information			
Description	General inform	ation on hosp	itals within the dataset			
CSV Revised File C	Column Name	Data.Medic	are.gov Column Name		DDB Data Type	
Provider Number		Provider Nu	mber		Memo	
Hospital Name		Hospital Nai			Memo	
Address 1		Address1			Memo	
Address 2		Address2			Memo	
Address 3		Address3			Memo	
City		City			Memo	
State Sta		State			Text(2)	
ZIP Code		ZIP Code			Text(5)	
County		County Name			Text(25)	
Phone Number		Phone Number			Text(10)	
Hospital Type		Hospital Type			Text(50)	
Hospital Ownership		Hospital Owner			Text(100)	
Emergency Services		Emergency Services			Text(50)	
		Location			Memo	

Table Name (Back to Table Listing)			Physical: Data.Medicare.gov	Business	3
	Measure Dates		Measure Dates	Measure Data Collection	
				Periods	
Description	Current collect	ion dates for av	vailable measures included in th	ne Downlo	adable Database
CSV Revised File C	CSV Revised File Column Name Date		Data.Medicare.gov Column Name		DDB Data Type
Measure Name		Measure Nan	ne		Memo
Measure Start Quart	er	Measure Star	t Quarter		Memo
Measure Start Date		Measure Star	t Date		Memo
Measure End Quarte	er	Measure End	Quarter		Memo
Measure End Date		Measure End	Date		Memo

Table Name (Back to Table Listing)	Physical: Revi Flat File	sed CSV	Physical: Data.Medicare.gov	Busines	s
	FootNote		Hospital Footnote	Footnote	es
			Crosswalk		
Description	Look up table f	or footnote tex	t in the various data files		
CSV Revised File Column Name		Data.Medica	re.gov Column Name		DDB Data Type
Footnote Footnote				Text (50)	
FootnoteText		Footnote Tex	t		Memo

Table Name (Back to Table Listing)			Physical: Data.Medicare.gov	Business	
			Hospital ACS Measures	Hospital A	ACS Measures
Description	American Colle	ege of Surgeon	s (ACS) hospital-level results		
CSV Revised File C	CSV Revised File Column Name Data.Medicare.gov Column Name				DDB Data Type
CCN CCN					Text (6)
Hospital Name		Hospital Nan	ne		Memo
Surg65		Surg65			Memo
Surg65_FN		Surg65_FN			Memo
Colon Colon				Memo	
Colon_FN Colon_FN			·		Memo
LowExtBypass LowExtBypa			ass		Memo
LowExtBypass_FN		LowExtBypa	ss_FN	_	Memo

Table Name	Physical: Revised CS v		Pnysicai:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Agency for Healthcare		Agency for Healthcare AHRQ		SI Hospital Results
	Research and Quality		Research and Quality		
			Measures		
Description	AHRQ PSI measures h	ospital	-level results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name		Hospital Name			Memo
Address 1		Address 1			Memo
Address 2		Address 2			Memo
Address 3		Address 3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County Name Cou		Coun	County Name		Text(25)
Phone Number Phone			Phone Number		Text(10)
Death from serious treatable complications		Death from serious treatable complications		cations	Memo
after surgery		after	surgery		

Table Name	Physical: Revised CS	V	Physical: Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Agency for Healthcare		Agency for Healthcare	AHRQ PS	SI Hospital Results
	Research and Quality		Research and Quality		
			Measures		
Description	AHRQ PSI measures h	ospital	-level results		
CSV Revised File C			Medicare.gov Column Name		DDB Data Type
Footnote - Death fro			ote - Death from serious treatal	ble	Memo
complications after s	surgery	comp	lications after surgery		
Collapsed lung due t	to medical treatment	Colla	psed lung due to medical treatn	nent	Memo
Footnote - Collapsed	l lung due to medical	Footn	ote - Collapsed lung due to me	dical	Memo
treatment		treatn			
Serious blood clots a			us blood clots after surgery		Memo
	lood clots after surgery		ote - Serious blood clots after s		Memo
A wound that splits	<u> </u>		und that splits open after surger	•	Memo
Footnote - A wound	that splits open after	Footn	ote - A wound that splits open	after	Memo
surgery		surge			
Accidental cuts and	tears from medical	Accid	lental cuts and tears from medic	cal	Memo
treatment		treatn			
	al cuts and tears from	Footnote - Accidental cuts and tears from			Memo
medical treatment		medical treatment			
Serious Complicatio		Serious Complications			Memo
Footnote - Serious C		Footnote - Serious Complications			Memo
Number of Patients -	- Death from serious	Number of Patients - Death from serious			Memo
treatable complication		treatable complications after surgery			
Rate - Death from se		Rate - Death from serious treatable			Memo
complications after s			lications after surgery		
Lower Estimate - De			r Estimate - Death from serious	s treatable	Memo
treatable complication			lications after surgery		
Higher Estimate - De		Higher Estimate - Death from serious			Memo
treatable complication		treatable complications after surgery			
	- Collapsed lung due to	Number of Patients - Collapsed lung due to			Memo
medical treatment			cal treatment		
Rate - Collapsed lun	g due to medical		- Collapsed lung due to medica	l	Memo
treatment		treatn			2.5
	± • •		r Estimate - Collapsed lung due	e to	Memo
medical treatment		medical treatment		3.5	
_	Higher Estimate - Collapsed lung due to		er Estimate - Collapsed lung du	e to	Memo
medical treatment			cal treatment	1	3.6
Number of Patients -	- Serious blood clots		per of Patients - Serious blood	clots after	Memo
after surgery	1	surgery			3.6
Rate - Serious blood	<u> </u>	Rate - Serious blood clots after surgery			Memo
	rious blood clots after		r Estimate - Serious blood clots	s after	Memo
surgery		surge	ry		

Table Name	Physical: Revised CS	V	Physical:	Business		
(Back to Table Listing)	Flat File	•	Data.Medicare.gov			
\	Agency for Healthcare				SI Hospital Results	
	Research and Quality		Research and Quality		511105p100111050110	
			Measures			
Description	AHRQ PSI measures h	ospital				
CSV Revised File C			.Medicare.gov Column Name		DDB Data Type	
	erious blood clots after		er Estimate - Serious blood clot		Memo	
surgery		surge				
	- A wound that splits		ber of Patients - A wound that s	plits	Memo	
open after surgery	1		after surgery	1		
Rate - A wound that	splits open after		- A wound that splits open after	surgery	Memo	
surgery						
Lower Estimate - A	Lower Estimate - A wound that splits open		er Estimate - A wound that split	s open	Memo	
after surgery		after surgery				
Higher Estimate - A	wound that splits open	High	er Estimate - A wound that spli	ts open	Memo	
after surgery		after	surgery			
	- Accidental cuts and	Number of Patients - Accidental cuts and			Memo	
tears from medical tr		tears	from medical treatment			
Rate - Accidental cu	ts and tears from	Rate - Accidental cuts and tears from medical		Memo		
medical treatment		treatr				
	ecidental cuts and tears	Lower Estimate - Accidental cuts and tears		Memo		
from medical treatm			medical treatment			
	ccidental cuts and tears		er Estimate - Accidental cuts ar	d tears	Memo	
from medical treatment		from medical treatment				
Number of Patients - Serious		Number of Patients - Serious Complications		ications	Memo	
Complications						
Rate - Serious Comp		Rate - Serious Complications		Memo		
Lower Estimate - Se	-		er Estimate - Serious Complicat		Memo	
Higher Estimate - Se	erious Complications	High	er Estimate - Serious Complica	tions	Memo	

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Agency for Healthcare		Agency for Healthcare	AHRQ PS	SI State Results
	Research and Quality -	State	Research and Quality - State		
			Measures		
Description	AHRQ PSI measures s	tate-lev	vel results		
CSV Revised File C	Column Name	Data.	Medicare.gov Column Name		DDB Data Type
State		State			Memo
Worse - Death from	serious treatable	Wors	e - Death from serious treatable	;	Memo
complications after s	surgery	comp	lications after surgery		
Same - Death from s	serious treatable	Same	- Death from serious treatable		Memo
complications after s	surgery	comp	lications after surgery		
Better - Death from	serious treatable		r - Death from serious treatable		Memo
complications after s	• •		lications after surgery		
Too few - Death from			ew - Death from serious treatab	ole	Memo
complications after s			lications after surgery		
Worse - Collapsed la	ung due to medical	Wors	e - Collapsed lung due to medic	cal	Memo
treatment		treatn			
Same - Collapsed lu	ng due to medical		- Collapsed lung due to medica	al	Memo
treatment		treatn			
Better - Collapsed lu	ing due to medical	Better - Collapsed lung due to medical			Memo
	treatment		nent		
_	lung due to medical	Too few - Collapsed lung due to medical			Memo
treatment	1 1	treatment			3.6
	od clots after surgery	Worse - Serious blood clots after surgery			Memo
Same - Serious bloo	<u> </u>	Same - Serious blood clots after surgery			Memo
	od clots after surgery	Better - Serious blood clots after surgery			Memo
	ood clots after surgery		ew - Serious blood clots after s		Memo
Worse - A wound th	at splits open after		e - A wound that splits open aft	er	Memo
surgery	, 1', C,	surge			3.4
Same - A wound that	it splits open after	Same	- A wound that splits open after	er surgery	Memo
Surgery	-41'.4	D -44 -	. A 1 1141'4		Mana
Better - A wound that	at spiits open after		r - A wound that splits open aft	er	Memo
surgery	41-04 omlite om om often	surge		- Ct - u	Mama
	that splits open after		ew - A wound that splits open a	iner	Memo
worse - Accidental of	outs and tages from	surge	e - Accidental cuts and tears fro	\m	Memo
medical treatment	cuts and wars mom		e - Accidental cuts and tears fro cal treatment	ш	INICILIO
			- Accidental cuts and tears from	n	Memo
medical treatment	Same - Accidental cuts and tears from		cal treatment	.11	IVICIIIO
	Better - Accidental cuts and tears from		r - Accidental cuts and tears fro	m	Memo
medical treatment		medical treatment			TVICIIIO
	ll cuts and tears from	Too few - Accidental cuts and tears from		rom	Memo
medical treatment	. Tall and tonic itoin		cal treatment		
Worse - Serious Cor	nplications		e - Serious Complications		Memo
5155 Selfous Col	r	., 515	- Strong Comprisations		1

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Agency for Healthcare		Agency for Healthcare	AHRQ PS	SI State Results
	Research and Quality -	State	Research and Quality - State		
			Measures		
Description	AHRQ PSI measures s	tate-lev	vel results		
CSV Revised File C	Column Name	Data.	.Medicare.gov Column Name		DDB Data Type
Same - Serious Complications Same		Same	- Serious Complications		Memo
1		r - Serious Complications		Memo	
Too few - Serious C	omplications	Too f	ew - Serious Complications		Memo

Table Name	Physical: Revised CS	V	Physical:	Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Agency for Healthcare		Agency for Healthcare	AHRQ PS	SI National Results	
	Research and Quality -		Research and Quality -			
	National		National Measures			
Description	AHRQ PSI measures n	AHRQ PSI measures national results				
CSV Revised File C	Column Name	Data.	.Medicare.gov Column Name		DDB Data Type	
Measure		Measure		Memo		
U S National Rate U.S		U.S. National Rate		Memo		
National Patient Safety Measure		National Patient Safety Measure Performance		Memo		
Performance			·			

Table Name			Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Emergency Departmen	t	Emergency Department Process of		f Care—
	Throughput		Care Measures	Emergenc	y Department
				Hospital F	Results
Description			Department measure hospital-		S
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Provider ID		Provi	der ID		Memo
Hospital Name		Hosp	Hospital Name		Memo
Address 1	Address 1		Address 1		Memo
Address 2		Addr	ess 2		Memo
Address 3		Address 3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP C	ZIP Code		Text(5)
County Name		County Name			Text(25)
Phone Number		Phone	e Number		Text(10)
Measure		Measure			Memo
Rate			Rate		Memo
Sample		Samp	ole		Memo
Footnote		Footr	note		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
	Emergency Departmen	t	Emergency Department	Process of	of Care—
	Throughput - State		Care Measures - State	Emergen	cy Department
				State Res	sults
Description	Process of Care—Emer	gency	Department state-level results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Provider ID		Provider ID			Memo
Measure Meas		Measure		Memo	
Rate (per 1,000 Discharges)		Rate (per 1,000 Discharges)		•	Memo
Footnote		Footnote			Memo

Table Name	Physical: Revised CS	V	Physical:	Business			
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov				
	Emergency Departmen	t	Emergency Department	Process of	of Care—		
	Throughput - National		Care Measures - National	Emergen	cy Department		
				National	Results		
Description	Process of Care—Emer	Process of Care—Emergency Department Hospital Results measure national results					
CSV Revised File C	Column Name	Data.Medicare.gov Column Name)	DDB Data Type		
Provider ID		Provider ID		Memo			
Measure Me		Meas	Measure		Memo		
Rate (per 1,000 Discharges)		Rate (per 1,000 Discharges)			Memo		
Footnote		Footr	note		Memo		

Table Name	Physical: Revised CSV		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Healthcare_Associated_Infe		Healthcare Associated	Healthca	re-Associated
	ctions		Infections	Infection	s Hospital Results
Description	Healthcare-Associated Infections measures hospital-level results				
CSV Revised File C	Column Name	Data	.Medicare.gov Column Nam	e	DDB Data Type
Provider ID		Provi	der ID		Memo
Hospital Name		Hosp	ital Name		Memo
Address 1		Addr	ess 1		Memo
Address 2		Addr	ess 2		Memo
Address 3		Addr	ess 3		Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIPC	Code		Text(5)
County Name		Coun	ty Name		Text(25)
Phone Number		Phone	e Number		Text(10)
Measure		Meas	ure		Memo
Score		Score	·		Memo
Footnote		Footr	note		Memo

Table Name	Physical: Revised CSV	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File	Data.Medicare.gov		
	Healthcare_Associated_In	fe Healthcare Associated	Healthcare-Associated	
	ctions	Infections	Infections Hospital Results	
Description	Healthcare-Associated Infections measures hospital-level results			
CSV Revised File Column Name Data		.Medicare.gov Column Name		DDB Data Type
	Lo	ocation		Memo

Table Name	Physical: Revised CSV	V	Physical:	Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Healthcare_Associated_Infe		Healthcare Associated	Healthcare-Associated		
	ctions_State		Infections - State Measures	Infections State Results		
Description	Healthcare-Associated Infections measures state-level results					
CSV Revised File Column Name		Data	ata.Medicare.gov Column Name		DDB Data Type	
Provider ID		Provider ID			Memo	
Measure		Measure			Memo	
Score		Score			Memo	
Footnote		Footnote			Memo	

Table Name	Physical: Revised CSV	7	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Healthcare_Associated_Infe		Healthcare Associated	Healthcare-Associated	
	ctions_National		Infections National	Infections National Results	
Description	Healthcare-Associated Infections measures national results				
CSV Revised File Column Name		Data	ata.Medicare.gov Column Name		DDB Data Type
Provider ID		Provider ID			Memo
Measure		Measure			Memo
Rate (per 1,000 Discharges)		Rate (per 1000 Discharges)		•	Memo
Footnote		Footnote			Memo

Table Name	· ·		Physical:	Business	
(Back to Table Listing)	Flat File		Data.Medicare.gov		
	Hospital Acquired		Hospital Acquired	Hospital-	Acquired
	Condition		Condition Measures	Condition	ns Hospital Results
Description	Hospital-Acquired Con	ditions	s measures hospital-level results	S	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Provider ID		Provi	der ID		Memo
Hospital Name		Hosp	ital Name	Memo	
Address 1	Address 1		ess 1		Memo
Address 2		Address 2			Memo
Address 3		Address 3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP (Code		Text(5)
County Name		Coun	ty Name		Text(25)
Phone Number		Phon	e Number	_	Text(10)
Measure		Meas	ure	_	Memo
Rate (per 1,000 Disc	charges)	Rate	(per 1,000 Discharges)		Memo

Table Name	Physical: Revised CS	V	Physical:	Business	S
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital Acquired		Hospital Acquired	Hospital-	-Acquired
	Condition - National		Condition - National	Condition	ns National Results
			Measures		
Description	Hospital-Acquired Con	ditions	s measures national results		
CSV Revised File C	CSV Revised File Column Name		Data.Medicare.gov Column Name		DDB Data Type
Measure		Measure			Memo
Score		Score			Memo

Table Name	Physical: Revised CSV Flat	Physical:	Business
(<u>Back to Table</u>	File	Data.Medicare.gov	
<u>Listing</u>)	HCAHPS Measures	Survey of Patients' Hospital	HCAHPS Hospital Results
		Experiences (HCAHPS)	
Description	HCAHPS measures hospital-	level results	
CSV Revised Fi	le Column Name D	ata.Medicare.gov Column Nam	e DDB Data Type
Provider Number	r P	rovider Number	Memo
Hospital Name	Ε	Iospital Name	Memo
Address 1	A	Address 1	Memo
Address 2	A	Address 2	Memo
Address 3	A	Address 3	Memo
City		Lity	Memo
State Sta		tate	Text(2)
ZIP Code	7	IP Code	Text(5)

Table Name	Physical: Revised CSV Fla		Physical:	S	
(<u>Back to Table</u>	File		Data.Medicare.gov		
<u>Listing</u>)	HCAHPS Measures		Survey of Patients' Hospital	Hospital Results	
			Experiences (HCAHPS)		
Description	HCAHPS measures hospit				
	le Column Name	1	ta.Medicare.gov Column Nam	e	DDB Data Type
County Name			unty Name		Text(25)
Phone Number			one Number		Text(10)
	ts who reported that their		cent of patients who reported the	at their	Memo
nurses "Sometim			ses "Sometimes" or "Never"		
communicated w			nmunicated well.		
-	ts who reported that their		cent of patients who reported the		Memo
	communicated well.		ses "Usually" communicated we		
	ts who reported that their		cent of patients who reported the		Memo
	communicated well.		ses "Always" communicated we		
	its who reported that their		cent of patients who reported the	at their	Memo
doctors "Someting			etors "Sometimes" or "Never"		
communicated w		-	nmunicated well.		2.5
	ts who reported that their		cent of patients who reported the		Memo
	" communicated well.		tors "Usually" communicated w	2.6	
	ts who reported that their	Percent of patients who reported that their			Memo
	" communicated well.		tors "Always" communicated w		2.6
	its who reported that they	Percent of patients who reported that they			Memo
	"Never" received help as	"Sometimes" or "Never" received help as			
soon as they war		soon as they wanted.			Mana
_	its who reported that they	Percent of patients who reported that they			Memo
wanted.	ed help as soon as they	"Usually" received help as soon as they wanted.			
	ts who reported that they	Percent of patients who reported that they			Memo
	ed help as soon as they	"Always" received help as soon as they			Memo
wanted.	ed help as soon as they	wanted.			
	its who reported that their		cent of patients who reported the	at their	Memo
-	imes" or "Never" well	pain was "Sometimes" or "Never" well			TVICINO
controlled.	anies of fiever wen	-	itrolled.	V C11	
	ts who reported that their		cent of patients who reported the	at their	Memo
-	ly" well controlled.		n was "Usually" well controlled.		1,201110
•	ts who reported that their	Ť			Memo
_	vs" well controlled.		n was "Always" well controlled.		
Percent of patients who reported that staff		Percent of patients who reported that staff			Memo
"Sometimes" or "Never" explained about		"Sometimes" or "Never" explained about			
medicines before	e giving it to them.	medicines before giving it to them.			
Percent of patien	ts who reported that staff	Percent of patients who reported that staff			Memo
	ned about medicines		sually" explained about medicing		
before giving it t			ing it to them.		

Table Name	Physical: Revised CSV F	lat			usiness	
(<u>Back to Table</u>	File		Data.Medicare.gov			
<u>Listing</u>)	HCAHPS Measures				Hospital Results	
			Experiences (HCAHPS)			
Description	HCAHPS measures hospit					
	le Column Name		ta.Medicare.gov Column Nam		DDB Data Type	
	ts who reported that staff		cent of patients who reported the		Memo	
•	ned about medicines		ways" explained about medicine	es before		
before giving it t		_	ing it to them.			
	ts who reported that their		cent of patients who reported that		Memo	
	om were "Sometimes" or		m and bathroom were "Sometim	nes" or		
"Never" clean.			ever" clean.		3.6	
	ts who reported that their		cent of patients who reported that		Memo	
	om were "Usually" clean.		m and bathroom were "Usually"		3.4	
	ts who reported that their		cent of patients who reported that		Memo	
	om were "Always" clean.		m and bathroom were "Always"		Maria	
	its who reported that the		cent of patients who reported that		Memo	
	room was "Sometimes"		und their room was "Sometimes	or		
or "Never" quiet			ever" quiet at night.	- 4 41	M	
_	its who reported that the		cent of patients who reported that		Memo	
	room was "Usually" quiet		und their room was "Usually" qu	met at		
at night.	ts who reported that the	nig		ot the ores	Memo	
	room was "Always" quiet	Percent of patients who reported that the area around their room was "Always" quiet at			Wieilio	
at night.	100m was Always quiet	nig				
	its at each hospital who	Percent of patients who reported that			Memo	
	S they were given	YES, they were given information about what			Wiemo	
	it what to do during	to do during their recovery at home.				
recovery.						
	ts who reported that they	Per	cent of patients who reported that	at they	Memo	
	nformation about what to	were not given information about what to do				
do during their re		during their recovery at home.				
	ts who gave their hospital	Per	cent of patients who gave their h	Memo		
	ower on a scale from 0	rating of 6 or lower on a scale from 0				
(lowest) to 10 (h	ighest).	(lowest) to 10 (highest).				
Percent of patien	ts who gave their hospital	Per	cent of patients who gave their h	nospital a	Memo	
_	on a scale from 0 (lowest)		ng of 7 or 8 on a scale from 0 (le	owest) to		
to 10 (highest).			(highest).			
Patients who gave their hospital a rating of		Patients who gave their hospital a rating of 9			Memo	
9 or 10 on a scale from 0 (lowest) to 10			10 on a scale from 0 (lowest) to	10		
(highest).			ghest).			
	ts who reported NO they	Percent of patients who reported NO,they			Memo	
	mend the hospital.		uld not recommend the hospital.		7.5	
	its who reported YES they		cent of patients who reported YI		Memo	
would probably	recommend the hospital.	WO	uld probably recommend the hos	spital.		

Table Name (Back to Table	Physical: Revised CSV Fla	at Physical: Data.Medicare.gov	Business					
<u>Listing</u>)	HCAHPS Measures	Survey of Patients' Hospital Experiences (HCAHPS)	HCAHPS Hospital Results					
Description	HCAHPS measures hospita	HCAHPS measures hospital-level results						
CSV Revised Fi	le Column Name	Data.Medicare.gov Column Name		DDB Data Type				
Patients who repo		Percent of patients who reported YES,they		Memo				
definitely recomi	mend the hospital.	would definitely recommend the hospital.						
Number of completed Surveys		Number of Completed Surveys		Memo				
Survey Response Rate S		urvey Response Rate Percent		Memo				
Hospital Footnot	e	Iospital Footnote		Memo				

Physical:

Business

Physical: Revised CSV

(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	HCAHPS Measures - St		Survey of Patients' Hospital	HCAHPS State Results	
		Experiences (HCAHPS) -			
			State Average		
Description	HCAHPS measures sta	ate-leve	el results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
State		State			Text(50)
Percent of patients w	ho reported that their	Perce	ent of patients who reported tha	t their	Memo
nurses 'Sometimes' o	or 'Never'	nurse	s "Sometimes" or "Never"		
communicated well.		comn	nunicated well.		
Percent of patients w	ho reported that their	Perce	ent of patients who reported tha	t their	Memo
nurses 'Usually' com	municated well.	nurse	s "Usually" communicated wel	1.	
Percent of patients w	ho reported that their		ent of patients who reported tha		Memo
nurses 'Always' com	municated well.	nurse	s "Always" communicated wel	l.	
Percent of patients w	Percent of patients who reported that their		ent of patients who reported that	t their	Memo
doctors 'Sometimes'	or 'Never'	docto	ors "Sometimes" or "Never"		
communicated well.	communicated well.		nunicated well.		
_	ho reported that their	Percent of patients who reported that their			Memo
doctors 'Usually' cor		doctors "Usually" communicated well.			
-	ho reported that their	Percent of patients who reported that their			Memo
doctors 'Always' con		doctors "Always" communicated well.			
	who reported that they	Percent of patients who reported that they			Memo
'Sometimes' or 'Neve	*		etimes" or "Never" received he	elp as	
soon as they wanted			as they wanted.		
-	who reported that they	Percent of patients who reported that they			Memo
'Usually' received he	elp as soon as they		ally" received help as soon as the	ney	
wanted.	1 . 1.11	wante		1	3.6
_	who reported that they		ent of patients who reported tha	•	Memo
'Always' received he	ap as soon as they		ays" received help as soon as the	ney	
wanted.	1	wante		4.41 :	Mana
Percent of patients who reported that their pain was 'Sometimes' or 'Never' well			ent of patients who reported tha		Memo
pain was Sometimes	s or never well	pain	was "Sometimes" or "Never" w	en	

Hospital_July 20130702 Last Saved: July 2, 2013

Table Name

Table Name	Physical: Revised CS	V	Physical:	Business	
(Back to Table Listing)	Flat File		Data.Medicare.gov		
	HCAHPS Measures - S	State	Survey of Patients' Hospital	HCAHPS	S State Results
			Experiences (HCAHPS) -		
			State Average		
Description	HCAHPS measures sta				
CSV Revised File C	Column Name		Medicare.gov Column Name		DDB Data Type
controlled.		contro			
	ho reported that their		nt of patients who reported that	t their	Memo
pain was 'Usually' w			was "Usually" well controlled.		
	ho reported that their		nt of patients who reported tha	t their	Memo
pain was 'Always' w			was "Always" well controlled.	22	
	ho reported that staff		nt of patients who reported that		Memo
'Sometimes' or 'Neve			etimes" or "Never" explained a	ıbout	
medicines before giv			cines before giving it to them.		3.6
	ho reported that staff		nt of patients who reported tha		Memo
	bout medicines before		ally" explained about medicine	s before	
giving it to them.	1		g it to them.	4 -4 - CC	M
	hortened that staff		nt of patients who reported tha		Memo
	bout medicines before		ays" explained about medicines	s before	
giving it to them.	the reported that their		g it to them.	t thair	Memo
room and bathroom	who reported that their	Percent of patients who reported that their room and bathroom were "Sometimes" or			Memo
'Never' clean.	were sometimes of	"Never" clean.			
	ho reported that their		nt of patients who reported that	t their	Memo
room and bathroom		room and bathroom were "Usually" clean.			Wiemo
	ho reported that their	Percent of patients who reported that their			Memo
room and bathroom			and bathroom were "Always"		
Percent of patients w	,		nt of patients who reported that		Memo
	om was 'Sometimes' or	around their room was "Sometimes" or			
'Never' quiet at night	.•	"Neve	er" quiet at night.		
Percent of patients w		Percent of patients who reported that the area			Memo
area around their roo	om was 'Usually' quiet	around their room was "Usually" quiet at			
at night.		night.			
Percent of patients w	<u> </u>		nt of patients who reported that		Memo
area around their roo	m was 'Always' quiet	aroun	d their room was "Always" qui	iet at	
at night.		night.			
Percent of patients at	-		nt of patients who reported that		Memo
reported that YES they were given		YES, they were given information about what			
information about what to do during		to do	during their recovery at home.		
recovery.		<u></u>			3.6
_	ho reported that they		nt of patients who reported tha	•	Memo
_	mation about what to		not given information about wl	nat to do	
do during their recov	·		g their recovery at home.	*, 1	. N. 4
Percent of patients w	ho gave their hospital	Perce	nt of patients who gave their he	ospital a	Memo

Table Name (Back to Table Listing)	Physical: Revised CS' Flat File	V	Physical: Data.Medicare.gov	Business	3
(HCAHPS Measures - S	State	Survey of Patients' Hospital Experiences (HCAHPS) - State Average	НСАНР	S State Results
Description	HCAHPS measures sta	te-leve	el results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
a rating of 6 or lower (lowest) to 10 (higher		_	g of 6 or lower on a scale from (est) to 10 (highest).	0	
Percent of patients w	ho gave their hospital	Percent of patients who gave their hospital a			Memo
a rating of 7 or 8 on to 10 (highest).	a scale from 0 (lowest)	rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest).			
· · · · ·	neir hospital a rating of om 0 (lowest) to 10	Percent of patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).			Memo
Percent of patients who reported NO they would not recommend the hospital.		Percent of patients who reported NO, they would not recommend the hospital.			Memo
		Percent of patients who reported YES, they would probably recommend the hospital.		Memo	
Patients who reporte definitely recommen	•	Perce	ent of patients who reported YE d definitely recommend the hos	S,they	Memo

Table Name	Physical: Revised CSV	7	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	HCAHPS Measures -		Survey of Patients' Hospital	HCAHPS	S National Results
	National		Experiences (HCAHPS) -		
			National Average		
Description	HCAHPS measures nat	ional r	results		
CSV Revised File C	Column Name	Data.Medicare.gov Column Name			DDB Data Type
HCAHPS Question	HCAHPS Question		HCAHPS Question		Memo
HCAHPS Answer Description HCA		HCAHPS Answer Description			Memo
HCAHPS Answer P	ercent	HCAHPS Answer Percent		•	Text(50)

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
	hvbp_ ami _02_07_201	13	Hospital Value-Based Purchasing (HVBP) - Acute Myocardial Infarction Scores	HVBP Pro AMI Resu	ocess of Care— ults
Description	Hospital Value Based I	Purchas	sing Acute Myocardial Infarction	on results	
CSV Revised File C	Column Name	Data.Medicare.gov Column Name			DDB Data Type
Provider Number		Provider Number			Memo
Hospital Name Ho		Hospital Name		Memo	
Address Ad		Address			Memo
City		City	City		Memo

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	hvbp_ ami _02_07_20	13	Hospital Value-Based	HVBP Pro	ocess of Care—
			Purchasing (HVBP) - Acute	AMI Resu	ılts
			Myocardial Infarction		
			Scores		
Description	Hospital Value Based	Purcha	sing Acute Myocardial Infarction	on results	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	:	DDB Data Type
State		State	:		Memo
ZIP Code		ZIP (Code	Memo	
County Name		Coun	nty Name	Memo	
AMI-7a Performanc	e Rate	AMI	-7a Performance Rate	Memo	
AMI-7a Achievemen	nt Points	AMI-7a Achievement Points			Memo
AMI-7a Improvement	nt Points	AMI	-7a Improvement Points	Memo	
AMI-7a Measure Sc	ore	AMI	-7a Measure Score	Memo	
AMI-8a Performanc	e Rate	AMI-8a Performance Rate		Memo	
AMI-8a Achievemen	nt Points	AMI	AMI-8a Achievement Points		Memo
AMI-8a Improvement	AMI-8a Improvement Points AMI		AMI-8a Improvement Points		Memo
AMI-8a Measure Score AM		AMI	AMI-8a Measure Score		Memo
AMI Condition/Proc	cedure Score	AMI	AMI Condition Procedure Score		Memo
		Loca	tion		Memo

Table Name	Physical: Revised CSV		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	hvbp_hai_02_07_2013	3	Hospital Value-Based	HVBP Hea	althcare-
			Purchasing (HVBP) -	Associated	Infections
			Healthcare-Associated	Results	
			Infection Scores		
Description	Hospital Value-Based	Purcha	asing Healthcare-Associated I	nfections resu	lts
CSV Revised File C	Column Name	Data	a.Medicare.gov Column Nar	ne	DDB Data Type
Provider Number		Prov	ider Number		Memo
Hospital Name		Hosp	Iospital Name		Memo
Address		Addr	ress		Memo
City		City			Memo
State		State	State		Memo
ZIP Code		ZIP (Code		Memo
County Name		Cour	nty Name		Memo
SCIP-Inf-1 Performa	ance Rate	SCIF	P-Inf-1 Performance Rate	Memo	
SCIP-Inf-1 Achieve	ment Points	SCIP-Inf-1 Achievement Points			Memo
SCIP-Inf-1 Improve	ment Points	SCIF	SCIP-Inf-1 Improvement Points		Memo
SCIP-Inf-1 Measure Score SC		SCIP	SCIP-Inf-1 Measure Score		Memo
SCIP-Inf-2 Performance Rate SCIP		P-Inf-2 Performance Rate		Memo	
SCIP-Inf-2 Achieve	ment Points	SCIF	P-Inf-2 Achievement Points		Memo
SCIP-Inf-2 Improve	ment Points	SCIF	P-Inf-2 Improvement Points		Memo

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)			Data.Medicare.gov		
	hvbp_hai_02_07_2013		Hospital Value-Based	HVBP He	ealthcare-
			Purchasing (HVBP) -	Associate	d Infections
			Healthcare-Associated	Results	
			Infection Scores		
Description			sing Healthcare-Associated Inf		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
SCIP-Inf-2 Measure	Score	SCIP-Inf-2 Measure Score			Memo
SCIP-Inf-3 Performa	ance Rate	SCIP	P-Inf-3 Performance Rate		Memo
SCIP-Inf-3 Achieven	ment Points	SCIP-Inf-3 Achievement Points			Memo
SCIP-Inf-3 Improve	ment Points	SCIP-Inf-3 Improvement Points			Memo
SCIP-Inf-3 Measure	Score	SCIP-Inf-3 Measure Score			Memo
SCIP-Inf-4 Performa	ance Rate	SCIP-Inf-4 Performance Rate		Memo	
SCIP-Inf-4 Achieven	ment Points	SCIP-Inf-4 Achievement Points		Memo	
SCIP-Inf-4 Improvement Points SCI		SCIP	SCIP-Inf-4 Improvement Points		Memo
SCIP-Inf-4 Measure Score SCII		SCIP	CIP-Inf-4 Measure Score		Memo
HAI Condition/Proc	edure Score	HAI	HAI Condition Procedure Score		Memo
		Loca	tion		Memo

Physical:

Physical: Revised CSV

Business

2013	II '. 137.1 D 1		
	Hospital Value-Based	HVBP H	CAHPS Results
	Purchasing (HVBP) -		
	•		
Data	.Medicare.gov Column Name		DDB Data Type
Prov	ider Number		Memo
Hosp	oital Name		Memo
Addı	ress		Memo
City			Memo
State)		Memo
ZIP	Code		Memo
Cour	nty Name		Memo
Com	Communication with Nurses Achievement		Memo
	ts		
Com	_		Memo
Com	Communication with Nurses Dimension		Memo
	Communication with Doctors Achievement		Memo
_			
	-	vement	Memo
Poin	ts		
	Provest Proves	Purchasing (HVBP) - Patient Experience of Care Domain Scores (HCAHPS) d Purchasing HCAHPS results Data.Medicare.gov Column Name Provider Number Hospital Name Address City State ZIP Code County Name Communication with Nurses Achiev Points Communication with Nurses Improv Points Communication with Nurses Dimens Score t Communication with Doctors Achiev Points	Purchasing (HVBP) - Patient Experience of Care Domain Scores (HCAHPS) d Purchasing HCAHPS results Data.Medicare.gov Column Name Provider Number Hospital Name Address City State ZIP Code County Name Communication with Nurses Achievement Points Communication with Nurses Improvement Points Communication with Nurses Dimension Score t Communication with Doctors Achievement Points t Communication with Doctors Improvement

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Table Name

Table Name	Physical: Revised CS	V	Physical:	Business	
(Back to Table Listing)	Flat File		Data.Medicare.gov		
	hvbp_hcahps_02_07_2	013	Hospital Value-Based	HVBP HO	CAHPS Results
			Purchasing (HVBP) -		
			Patient Experience of Care		
			Domain Scores (HCAHPS)		
Description	Hospital Value-Based I				
CSV Revised File C			.Medicare.gov Column Name		DDB Data Type
	n Doctors Dimension		nunication with Doctors Dimer	sion	Memo
Score		Score			
Responsiveness of H	Iospital Staff		onsiveness of Hospital Staff		Memo
Achievement Points			evement Points		
Responsiveness of H	lospital Staff		onsiveness of Hospital Staff		Memo
Improvement Points		-	ovement Points		
Responsiveness of H	lospital Staff		onsiveness of Hospital Staff Dir	mension	Memo
Dimension Score		Score			
Pain Management A			Management Achievement Poir		Memo
Pain Management In			Management Improvement Poir	nts	Memo
Pain Management D			Management Dimension Score		Memo
Communication about	ut Medicines		nunication about Medicines		Memo
Achievement Points			evement Points		
	Communication about Medicines		nunication about Medicines		Memo
Improvement Points		Improvement Points			
Communication about	ut Medicines	Communication about Medicines Dimension			Memo
Dimension Score		Score			
Cleanliness and Quie	-	Cleanliness and Quietness of Hospital			Memo
Environment Achiev			conment Achievement Points		
Cleanliness and Quie		Cleanliness and Quietness of Hospital		Memo	
Environment Improv			conment Improvement Points		
Cleanliness and Quie	-		aliness and Quietness of Hospita	al	Memo
Environment Dimen			conment Dimension Score		
U	on Achievement Points		narge Information Achievement		Memo
	on Improvement Points		narge Information Improvement		Memo
Discharge Information			narge Information Dimension So		Memo
Overall Rating of Ho	ospital Achievement		all Rating of Hospital Achieven	nent	Memo
Points		Point			
Overall Rating of Hospital Improvement		Overall Rating of Hospital Improvement			Memo
Points		Point		~	3.6
Overall Rating of Ho	ospital Dimension	Overa	all Rating of Hospital Dimension	n Score	Memo
Score		***	TIPO D		3.6
HCAHPS Base Scor			HPS Base Score		Memo
HCAHPS Consisten	cy Score		HPS Consistency Score		Memo
		Locat	ion .		Memo

Table Name	Physical: Revised CSV	J	Physical:	Business	
(Back to Table Listing)	Flat File		Data.Medicare.gov		
	hvbp_hf_02_07_2013		Hospital Value-Based	HVBP Pro	ocess of Care—
			Purchasing (HVBP) - Heart	Heart Fail	lure Results
			Failure Scores		
Description	Hospital Value-Based I	urcha	sing Process of Care—Heart F	ailure resul	ts
CSV Revised File C	olumn Name	Data	a.Medicare.gov Column Name	e	DDB Data Type
Provider Number		Prov	ider Number		Memo
Hospital Name		Hospital Name			Memo
Address		Address			Memo
City		City			Memo
State		State		Memo	
ZIP Code		ZIP Code		Memo	
County Name		Cou	County Name		Memo
HF-1 Performance R	ate	HF-1 Performance Rate		Memo	
HF-1 Achievement P	oints	HF-1 Achievement Points		Memo	
HF-1 Improvement Points H		HF-1 Improvement Points			Memo
HF-1 Measure Score HF		HF-1	HF-1 Measure Score		Memo
HF-1 Condition/Proc	edure Score	HF Condition Procedure Score			Memo
		Loca	ntion		Memo

Physical:

Data.Medicare.gov

Business

Physical: Revised CSV

Flat File

	hvbp_scip_02_07_2	2013	Hospital Value-Based Purchasing (HVBP) - Surgical Care Improvement Project Scores		cocess of Care— Care Improvement esults
Description	Hospital Value-Base results	ed Purch	asing Process of Care— Surgica	al Care Imp	rovement Project
CSV Revised File	Column Name	Dat	a.Medicare.gov Column Name	2	DDB Data Type
Provider Number		Pro	vider Number		Memo
Hospital Name		Hos	pital Name		Memo
Address		Add	lress	Memo	
City		City	7	Memo	
State		Stat	e	Memo	
ZIP Code		ZIP	Code		Memo
County Name		Cou	nty Name	Memo	
SCIP-Card-2 Perfor	rmance Rate	SCI	P-Card-2 Performance Rate	Memo	
SCIP-Card-2 Achie	vement Points	SCI	SCIP-Card-2 Achievement Points		Memo
SCIP-Card-2 Improvement Points		SCI	SCIP-Card-2 Improvement Points		Memo
SCIP-Card-2 Measure Score		SCI	SCIP-Card-2 Measure Score		Memo
SCIP-VTE-1 Perfor	ormance Rate		SCIP-VTE-1 Performance Rate		Memo
SCIP-VTE-1 Achievement Points		SCI	SCIP-VTE-1 Achievement Points		Memo
SCIP-VTE-1 Impro	vement Points	SCI	SCIP-VTE-1 Improvement Points		Memo

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Table Name

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Table Name	Physical: Revised CSV	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	hvbp_scip_02_07_2013	3	Hospital Value-Based	HVBP Pro	ocess of Care—
			Purchasing (HVBP) -	Surgical C	Care Improvement
			Surgical Care Improvement	Project Re	esults
			Project Scores		
Description	Hospital Value-Based I	Purcha	sing Process of Care—Surgica	l Care Impi	ovement Project
	results				
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
SCIP-VTE-1 Measu	re Score	SCIP	-VTE-1 Measure Score		Memo
SCIP-VTE-2 Perform	mance Rate	SCIP-VTE-2 Performance Rate			Memo
SCIP-VTE-2 Achiev	vement Points	SCIP-VTE-2 Achievement Points			Memo
SCIP-VTE-2 Improv	vement Points	SCIP-VTE-2 Improvement Points			Memo
SCIP-VTE-2 Measure Score SCIF		SCIP-VTE-2 Measure Score			Memo
SCIP Condition/Pro	cedure Score	SCIP	Condition Procedure Score		Memo
		Locat	tion		Memo

Table Name	Physical: Revised CSV		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	hvbp_pn_02_07_2013		Hospital Value-Based	HVBP Process of Care—	-
			Purchasing (HVBP) -	Pneumonia Results	
			Pneumonia Scores		
Description	Hospital Value-Based l	Purcha	sing Process of Care—Pneumo	nia measure results	
CSV Revised File (Column Name	Data	.Medicare.gov Column Name	DDB Data Ty	ype
Provider Number		Provi	der Number	Memo	
Hospital Name		Hosp	ital Name	Memo	
Address		Addr	ess	Memo	
City		City		Memo	
State		State		Memo	
ZIP Code		ZIP (Code	Memo	
County Name		Coun	ty Name	Memo	
PN-3b Performance	Rate	PN-3	b Performance Rate	Memo	
PN-3b Achievement	Points	PN-3	b Achievement Points	Memo	
PN-3b Improvement	Points	PN-3	b Improvement Points	Memo	
PN-3b Measure Scor	re	PN-3b Measure Score		Memo	
PN-6 Performance R	Rate	PN-6 Performance Rate		Memo	
PN-6 Achievement Points		PN-6	Achievement Points	Memo	
PN-6 Improvement Points PN		PN-6	Improvement Points	Memo	
PN-6 Measure Score PN			Measure Score	Memo	
PN Condition/Proce	dure Score	PN C	Condition Procedure Score	Memo	
		Loca	tion	Memo	

Table Name (Back to Table Listing)	Physical: Revised CS' Flat File	V	Physical: Data.Medicare.gov	Business	
	hvbp_ tps _02_07_201	3	Hospital Value-Based	HVBP To	otal Performance
			Purchasing (HVBP) - Total	Score Res	sults
			Performance Scores		
Description		core for	r Hospital Value-Based Purcha	sing	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	•	DDB Data Type
Provider Number		Provi	ider Number		Memo
Hospital Name		Hosp	ital Name		Memo
Address		Addr	ress		Memo
City		City			Memo
State		State			Memo
ZIP Code		ZIP Code			Memo
County Name		County Name			Memo
•	ized Clinical Process	Unweighted Normalized Clinical Process of			Memo
of Care Domain Sco	re	Care Domain Score			
_	rocess of Care Domain	Weighted Clinical Process of Care Domain			Memo
Score		Score			
Unweighted Patient	Experience of Care	Unweighted Patient Experience of Care		Memo	
Domain Score		Domain Score			
Weighted Patient Experience of Care		Weighted Patient Experience of Care Domain			Memo
Domain Score		Score			
Total Performance S	core	Total Performance Score			Memo
		Location			Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business	Business	
	Immunization		Preventive Care Measures		of Care— ation Hospital	
Description	Process of Care—Immi	unizati	ion measures hospital-level res	ults		
CSV Revised File C	Column Name Dat	ta.Med	dicare.gov Column Name		DDB Data Type	
Provider ID		Provi	Provider ID		Memo	
Hospital Name		Hosp	Hospital Name		Memo	
Address 1		Addr	ress 1	Memo		
Address 2		Addr	ddress 2		Memo	
Address 3		Addr	ddress 3		Memo	
City		City	ity		Memo	
State		State	tate		Text(2)	
ZIP Code		ZIP (IP Code		Text(5)	
County Name	Cou		ounty Name		Text(25)	
Phone Number	Phor		one Number		Text(10)	
Measure		Meas	asure		Memo	
Rate		Rate	te		Memo	

Table Name	Physical: Revised C	SV	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Immunization		Preventive Care Measures	Process of	of Care—
				Immuniz	ation Hospital
				Results	
Description	Process of Care—Imi	munizati	ion measures hospital-level resu	ılts	
CSV Revised File Column Name Data.M		ata.Med	dicare.gov Column Name		DDB Data Type
Sample		Samp	ole		Memo
Footnote		Footi	note		Memo

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Immunization-State		Preventive Care Measures -	Process of	f Care—
			State	Immunization State Results	
Description	Process of Care—Immunization measure state-level res				
CSV Revised File C	CSV Revised File Column Name		Data.Medicare.gov Column Name		DDB Data Type
Provider ID		Provi	Provider ID		Memo
Measure Meas		Measure		Memo	
Rate (per 1,000 Discharges) Rate		(per 1,000 Discharges)		Memo	
Footnote		Footr	note		Memo

Table Name (Back to Table Listing)	Physical: Revised CS Flat File	V	Physical: Data.Medicare.gov	Business	3		
	Immunization-Nationa	1	Preventive Care Measures -	Process of	of Care—		
			National	Immuniz	ation National		
				Results			
Description	Process of Care—Imm	Process of Care—Immunization measures national results					
CSV Revised File C	Column Name	Data.Medicare.gov Column Name		!	DDB Data Type		
Provider ID		Provi	Provider ID		Memo		
Measure		Meas	Measure		Memo		
Rate (per 1,000 Discharges)		Rate	Rate (per 1,000 Discharges)		Memo		
Footnote		Footr	note		Memo		

Table Name	Physical: Revised CS	V	Physical:	Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Medicare Spending Per	ſ	Medicare Spending Per	Medicare	Spending Per	
	Patient		Patient	Patient Ho	ospital Results	
Description	Medicare Spending Per	Medicare Spending Per Patient measures hospital-level results				
CSV Revised File C	Column Name	Data	Data.Medicare.gov Column Name		DDB Data Type	
Provider ID		Provider ID			Memo	
Hospital Name		Hosp	Hospital Name		Memo	
Address 1		Addr	Address 1		Memo	
Address 2		Addr	ess 2		Memo	
Address 3		Addr	ess 3		Memo	

Table Name	Physical: Revised CSV I		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File I		Data.Medicare.gov		
	Medicare Spending Per	r	Medicare Spending Per	Medicare	Spending Per
	Patient		Patient	Patient Ho	ospital Results
Description	Medicare Spending Per	r Patiei	nt measures hospital-level resul	ts	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County Name		Coun	ty Name	Text(25)	
Phone Number		Phon	Phone Number		Text(10)
Measure		Meas	l easure		Memo
Spending per Hospital Patient with		Spending per Hospital Patient with Medicare		Memo	
Medicare					
Footnote		Footr	note		Memo

Table Name	Physical: Revised CS	V	Physical:	Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Medicare Spending Per		Medicare Spending Per	Medicare	Spending Per	
	Patient-State		Patient - State	Patient St	ate Results	
Description	Medicare Spending Per	Medicare Spending Per Patient measures state-level results				
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type	
Provider ID		Provider ID			Memo	
Measure		Meas	sure		Memo	
Score Score				Memo		
Footnote		Footr	note		Memo	

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business		
	Medicare Spending Per	•	Medicare Spending Per	Medicare	Spending Per	
	Patient-National		Patient - National	Patient Na	ational Results	
Description	Medicare Spending Per	Medicare Spending Per Patient measures national results				
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type	
Provider ID		Provider ID			Memo	
Measure	Measure Meas		ure		Memo	
Score		Score	,		Memo	
Footnote		Footr	note		Memo	

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
			Spending Breakdown By	Medicare	Spending Per
			Claim	Patient - S	Spending
				Breakdow	n By Claim
Description	Medicare Spending Per	r Patiei	nt measures spending breakdow	n by claim	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	;	DDB Data Type
		Hosp	ital Name		Memo
			der Number	Memo	
		State	tate		Text (2)
		Perio	riod		Memo
		Clain	aim Type		Memo
		Avg	Spending Per Episode (Hospital)		Memo
		Avg Spending Per Episode (State)		Memo	
		Avg	Spending Per Episode (Nation)		Memo
	Perce		ent of Spending (Hospital)		Memo
			ent of Spending (State)		Memo
		Perce	ent of Spending (Nation)		Memo

Table Name (Back to Table Listing)	•		Physical: Data.Medicare.gov	Business	
	Medicare Volume Mea	sures	Hospital Medicare Volume	Medicare '	Volume Hospital
			Measures	Results	_
Description	Medicare Volume mea	sures h	ospital-level results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name		Hosp	ital Name		Memo
Address 1		Address 1			Memo
Address 2		Address 2			Memo
Address 3		Address 3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County Name		County Name			Text(25)
Phone Number		Phone Number			Text(10)
Diagnosis Related Group		Diagnosis Related Group			Text(25)
Number Of Cases		Number Of Cases			Text(50)
Footnote		Footnote			Memo

Table Name	Physical: Revised CS	V	Physical:	Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Medicare Volume Measures I		Hospital Medicare Volume	Medicare Volume State		
	- State		Measures - State Average	Results		
Description	Medicare Volume measures state results					
CSV Revised File C	Column Name	Data.Medicare.gov Column Name			DDB Data Type	
State		State			Text(50)	
Diagnosis Related G	roup	Diagi	nosis Related Group		Text(25)	
Number Of Cases Numb		ber Of Cases		Text(50)		
Footnote		Footr	note		Memo	

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
	Medicare Volume Measures I		Hospital Medicare Volume		Volume National
	- National		Measures - National	Results	
			Average		
Description	Medicare Volume meas	sures n	ational results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Diagnosis Related Group		Diagnosis Related Group			Text(25)
Number Of Cases		Numl	ber Of Cases		Text(50)

Table Name	Physical: Revised CSV		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Outcome of Care Measures		Hospital Outcome Of Care	30-Day M	Iortality and
			Measures	Readmiss	ion Hospital
				Results	
Description	30-Day Mortality and I	Readm	ission measures hospital-level	results	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name		Hosp	ital Name		Memo
Address 1		Address 1			Memo
Address 2		Address 2			Memo
Address 3		Address 3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County Name		County Name			Text(25)
Phone Number		Phone Number			Text(10)
Hospital 30-Day Death (Mortality) Rates		Hospital 30-Day Death (Mortality) Rates		Rates	Memo
from Heart Attack		from Heart Attack			
Comparison to U.S.	Rate - Hospital 30-Day	Comparison to U.S. Rate - Hospital 30-Day			Memo
Death (Mortality) Ra	ates from Heart Attack	Death	n (Mortality) Rates from Heart	Attack	

Table Name	Physical: Revised CS	V	V Physical: Busi		Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Outcome of Care Meas	ures	Hospital Outcome Of Care	30-Day Mortality and		
			Measures	Readmiss	ion Hospital	
				Results		
Description			ission measures hospital-level r			
CSV Revised File C			Medicare.gov Column Name		DDB Data Type	
Lower Mortality Est	-		er Mortality Estimate - Hospital	-	Memo	
Day Death (Mortalit	y) Rates from Heart	Death	n (Mortality) Rates from Heart	Attack		
Attack						
Upper Mortality Esti			r Mortality Estimate - Hospital	•	Memo	
Day Death (Mortalit	y) Rates from Heart	Death	n (Mortality) Rates from Heart	Attack		
Attack	77 1 100 5					
Number of Patients -			ber of Patients - Hospital 30-Da	•	Memo	
	ates from Heart Attack		tality) Rates from Heart Attack			
Footnote - Hospital 3			note - Hospital 30-Day Death (N	Mortality)	Memo	
(Mortality) Rates fro			from Heart Attack			
_	ath (Mortality) Rates		ital 30-Day Death (Mortality) F	Rates	Memo	
from Heart Failure			Heart Failure	20.5		
_	Rate - Hospital 30-Day	Comparison to U.S. Rate - Hospital 30-Day			Memo	
	ates from Heart Failure	Death (Mortality) Rates from Heart Failure			3.6	
Lower Mortality Est	-		r Mortality Estimate - Hospital	-	Memo	
Day Death (Mortalit	y) Rates from Heart	Death	(Mortality) Rates from Heart	Failure		
Failure		T T	. Mantalita Estimata II. anital	20 D	Mana	
Upper Mortality Esti	-	Upper Mortality Estimate - Hospital 30-Day			Memo	
Day Death (Mortalit Failure	y) Rates from Heart	Death (Mortality) Rates from Heart Failure				
	Hospital 20 Day	Niveral	non of Dationts Hospital 20 Da	vy Dooth	Memo	
Number of Patients -	ates from Heart Failure	Number of Patients - Hospital 30-Day Death (Mortality) Rates from Heart Failure			Memo	
Footnote - Hospital 3			•		Memo	
(Mortality) Rates fro	•	Footnote - Hospital 30-Day Death (Mortality) Rates from Heart Failure			INICHIO	
Hospital 30-Day Dea				Pates	Memo	
from Pneumonia	am (Mortanty) Rates	Hospital 30-Day Death (Mortality) Rates from Pneumonia			IVICIIIO	
	Rate - Hospital 30-Day	Comparison to U.S. Rate - Hospital 30-Day			Memo	
<u> </u>	ates from Pneumonia	Death (Mortality) Rates from Pneumonia			TVICIIIO	
Lower Mortality Est			er Mortality Estimate - Hospital		Memo	
Day Death (Mortalit	<u> -</u>		n (Mortality) Rates from Pneum		1/101110	
Pneumonia	<i>J</i> / 14400 110111	2 Cuti	- (2.231umity) Tunes Hom Thous			
	Upper Mortality Estimate - Hospital 30-		r Mortality Estimate - Hospital	30-Day	Memo	
Day Death (Mortalit	-		(Mortality) Rates from Pneum	•		
Pneumonia	. /		3,			
Number of Patients -	- Hospital 30-Day	Numl	ber of Patients - Hospital 30-Da	y Death	Memo	
	ates from Pneumonia		tality) Rates from Pneumonia	•		
Footnote - Hospital 3			note - Hospital 30-Day Death (N	Mortality)	Memo	
(Mortality) Rates fro	•		from Pneumonia	• •		

Table Name	Physical: Revised CS	V	Physical:	Business	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov	20.5		
	Outcome of Care Meas	ures	Hospital Outcome Of Care	_	Interest of the second	
			Measures		sion Hospital	
D	20 Dan Mantalitas and I) 1 ¹		Results		
Description			ission measures hospital-level r		DDD D 4 T	
CSV Revised File C			.Medicare.gov Column Name		DDB Data Type	
	admission Rates from		ital 30-Day Readmission Rates	from	Memo	
Heart Attack	D . II 120 D		Attack	20 D	3.6	
1 -	Rate - Hospital 30-Day	_	parison to U.S. Rate - Hospital	•	Memo	
Readmission Rates f			mission Rates from Heart Attac		3.4	
Lower Readmission	_		er Readmission Estimate - Hosp		Memo	
30-Day Readmission	n Rates from Heart	Day I	Readmission Rates from Heart	Attack		
Attack	Datimata IIit-120	T I	n Dandenianian Estimate II	:4-1 20	Maria	
	Estimate - Hospital 30-		r Readmission Estimate - Hosp		Memo	
	ates from Heart Attack		Readmission Rates from Heart		Mama	
Number of Patients - Readmission Rates f	- ·		ber of Patients - Hospital 30-Da	•	Memo	
			mission Rates from Heart Attac		Memo	
Rates from Heart At	30-Day Readmission	Footnote - Hospital 30-Day Readmission Rates from Heart Attack			Memo	
		Hospital 30-Day Readmission Rates from			Maria	
Heart Failure	Hospital 30-Day Readmission Rates from		•	Memo		
	Rate - Hospital 30-Day	Heart Failure Comparison to U.S. Rate - Hospital 30-Day			Memo	
Readmission Rates f	± •	Readmission Rates from Heart Failure			Wieilio	
Lower Readmission		Lower Readmission Estimate - Hospital 30-			Memo	
30-Day Readmission	_	Day Readmission Rates from Heart Failure			Wichio	
Failure	i Raics from ficart	Dayı	Readinission Rates from Heart	ranuic		
	Estimate - Hospital 30-	Upper Readmission Estimate - Hospital 30-			Memo	
	ates from Heart Failure	Day Readmission Rates from Heart Failure			Wiemo	
Number of Patients -		Number of Patients - Hospital 30-Day			Memo	
Readmission Rates f			mission Rates from Heart Failu	-	1,101110	
	30-Day Readmission	Footnote - Hospital 30-Day Readmission			Memo	
Rates from Heart Fa			from Heart Failure	- · 		
	admission Rates from	Hospital 30-Day Readmission Rates from		Memo		
Pneumonia Pneumonia		_	monia	- '		
	Rate - Hospital 30-Day		parison to U.S. Rate - Hospital	30-Day	Memo	
Readmission Rates f	± •		mission Rates from Pneumonia	•		
Lower Readmission Estimate - Hospital			er Readmission Estimate - Hosp		Memo	
	30-Day Readmission Rates from		Readmission Rates from Pneum			
Pneumonia						
Upper Readmission	Estimate - Hospital 30-	Upper Readmission Estimate - Hospital 30-		ital 30-	Memo	
Day Readmission Ra	ates from Pneumonia	Day I	Readmission Rates from Pneum	nonia		
Number of Patients -	- Hospital 30-Day	Numl	ber of Patients - Hospital 30-Da	ıy	Memo	
Readmission Rates f	From Pneumonia	Read	mission Rates from Pneumonia			

Table Name	Physical: Revised CSV	7	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Outcome of Care Meas	ures	Hospital Outcome Of Care	30-Day M	lortality and
			Measures	Readmiss	ion Hospital
				Results	
Description	30-Day Mortality and F	Readm	ission measures hospital-level 1	esults	
CSV Revised File C	Column Name	Data.Medicare.gov Column Name			DDB Data Type
Footnote - Hospital 3	tnote - Hospital 30-Day Readmission Foot		Footnote - Hospital 30-Day Readmission		Memo
Rates from Pneumor	nia	Rates	from Pneumonia		
		Locat	tion		Memo

Table Name (Back to Table Listing)	Physical: Revised CS	V	Physical:	Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov	20 D A	б . (1') 1	
	Outcome of Care Meas	ures	Hospital Outcome Of Care	•	Day Mortality and	
D : 4	- State		Measures - State		ion State Results	
Description			ission measures state-level resu		DDD D 4 T	
CSV Revised File C	Column Name		.Medicare.gov Column Name	!	DDB Data Type	
State	1 20 1 D 1	State	: 120 D D d 04 d : 12) I	<u> </u>	Text(2)	
l -	s whose 30-day Death		ital 30-Day Death (Mortality) I		Memo	
(Mortality) Rates fro			Heart Attack - Better than U.S.	National		
Better than U.S. Nat		Rate			3.6	
	s whose 30-Day Death	-	ital 30-Day Death (Mortality) I		Memo	
	om Heart Attack are No	_	Heart Attack - No different tha	n U.S.		
different than U.S. N			nal Rate		2.6	
	s whose 30-Day Death	-	ital 30-Day Death (Mortality) I		Memo	
(Mortality) Rates from Heart Attack are		from Heart Attack - Worse than U.S. National				
Worse than U.S. Nat		Rate				
Number of Hospitals whose 30-Day Death			ital 30-Day Death (Mortality) I		Memo	
(Mortality) Rates fro		from Heart Attack - Number of Cases Too				
Number of Cases To		Small				
	s whose 30-Day Death	Hospital 30-Day Death (Mortality) Rates			Memo	
(Mortality) Rates from		from Heart Failure - Better than U.S. National				
Better than U.S. Nat		Rate				
	s whose 30-Day Death	Hospital 30-Day Death (Mortality) Rates			Memo	
(Mortality) Rates fro		from Heart Failure - No different than U.S.				
No different than U.		National Rate				
-	s whose 30-Day Death	_	ital 30-Day Death (Mortality) I		Memo	
(Mortality) Rates fro		from Heart Failure - Worse than U.S.				
Worse than U.S. Nat			nal Rate			
	s whose 30-Day Death		ital 30-Day Death (Mortality) I		Memo	
(Mortality) Rates from Heart Failure are		from Heart Failure - Number of Cases Too				
Number of Cases Too Small		Smal				
	s whose 30-Day Death		ospital 30-Day Death (Mortality) Rates		Memo	
(Mortality) Rates fro		from	Pneumonia - Better than U.S. I	National		
Better than U.S. Nat	ional Rate	Rate				

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Outcome of Care Meas	ures	res Hospital Outcome Of Care 30-Day M		lortality and
	- State		Measures - State Readmissi		ion State Results
Description			ission measures state-level resu		
CSV Revised File C	Column Name		.Medicare.gov Column Name		DDB Data Type
_	s whose 30-Day Death	_	ital 30-Day Death (Mortality) F		Memo
, ,	om Pneumonia are No		Pneumonia - No different than	U.S.	
different than U.S. N			nal Rate		
_	s whose 30-Day Death		ital 30-Day Death (Mortality) F		Memo
(Mortality) Rates fro			Pneumonia - Worse than U.S. I	National	
Worse than U.S. Nat		Rate			
	s whose 30-Day Death		ital 30-Day Death (Mortality) F		Memo
(Mortality) Rates fro			Pneumonia - Number of Cases	Too	
Number of Cases To		Small			
Number of Hospitals			ital 30-Day Readmission Rates		Memo
	From Heart Attack are	Heart	Attack - Better than U.S. Nation	onal Rate	
Better than U.S. Nat					
Number of Hospitals	•	Hospital 30-Day Readmission Rates from			Memo
	From Heart Attack are	Heart Attack - No different than U.S. National			
No different than U.		Rate			
Number of Hospitals whose 30-Day			ital 30-Day Readmission Rates		Memo
	From Heart Attack are	Heart Attack - Worse than U.S. National Rate			
Worse than U.S. Nat					
Number of Hospitals	-	Hospital 30-Day Readmission Rates from			Memo
	From Heart Attack are	Heart Attack - Number of Cases Too Small			
Number of Cases To		**	. 100 B		3.6
Number of Hospitals	-	Hospital 30-Day Readmission Rates from			Memo
	From Heart Failure are	Heart	Failure - Better than U.S. Nati	onal Rate	
Better than U.S. Nat		7.7	: 120 B B 1 : : B :	<u>C</u>	3.6
Number of Hospitals	•	_	ital 30-Day Readmission Rates		Memo
	From Heart Failure are		Failure - No different than U.S	5.	
No different than U.			nal Rate	C	3.6
Number of Hospitals	-	_	ital 30-Day Readmission Rates		Memo
	From Heart Failure are	Heart	Failure - Worse than U.S. Nati	ional Kate	
Worse than U.S. Nat		TT.	ital 20 Day Deedleri	fuor:	Maria
Number of Hospitals	=		ital 30-Day Readmission Rates		Memo
	From Heart Failure are	Heart Failure - Number of Cases Too Small			
Number of Cases Too Small Number of Hospitals whose 30-Day		Цост	ital 20 Day Baadmission Batas	from	Mama
_	-	_	ital 30-Day Readmission Rates monia - Better than U.S. Nation		Memo
Readmission Rates f		rneul	moma - Detter than U.S. Nation	iai Kale	
Better than U.S. Nat		Цоот	ital 20 Day Baadmission Batas	from	Memo
Number of Hospitals	From Pneumonia are No	_	ital 30-Day Readmission Rates monia - No different than U.S.		IVICIIIO
different than U.S. N		Rate	moma - no umetent man U.S.	rational	
uniterent man U.S. N	rational Rate	Nate			

Table Name	Physical: Revised CSV	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Outcome of Care Meas	ures	Hospital Outcome Of Care	30-Day M	Iortality and
	- State		Measures - State	Readmiss	ion State Results
Description	30-Day Mortality and R	0-Day Mortality and Readmission measures state-level results			
CSV Revised File Column Name		Data	Data.Medicare.gov Column Name		DDB Data Type
Number of Hospitals	s whose 30-Day	Hospital 30-Day Readmission Rates from		Memo	
Readmission Rates f	rom Pneumonia are	Pneur	monia - Worse than U.S. Nation	nal Rate	
Worse than U.S. Nat	tional Rate				
Number of Hospitals	s whose 30-Day	Hospital 30-Day Readmission Rates from		from	Memo
Readmission Rates f	rom Pneumonia are	Pneur	monia - Number of Cases Too	Small	
Number of Cases To	oo Small				

Table Name	Physical: Revised CSV	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Outcome of Care Measures		Hospital Outcome Of Care	30-Day M	Iortality and
	- National		Measures - National	Readmiss	ion National
			Average	Results	
Description	30-Day Mortality and F	Readm	ission measures national results	S	
CSV Revised File C	Column Name	Data	Data.Medicare.gov Column Name		DDB Data Type
Condition		Condition			Text(13)
Measure Name		Measure Name			Memo
National Mortality/F	Readmission Rate	Natio	onal Mortality/Readmission Rat	e	Text(50)

Table Name	Physical: Revised CSV		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Outpatient Imaging		Use Of Medical Imaging	Outpatien	t Imaging
	Efficiency Measures		Measures	Efficiency	Hospital Results
Description	Outpatient Imaging Eff	ficienc	y measures hospital-level result	ts	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	;	DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name		Hosp	ital Name		Memo
Address 1		Addr	ess 1		Memo
Address 2	Address 2		ess 2		Memo
Address 3		Addr	ess 3		Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP (Code		Text(5)
County Name		Coun	ty Name		Text(25)
Phone Number		Phon	e Number		Text(10)
Outpatients with low	w back pain who had an	Outpa	atients with low back pain who	had an	Memo
MRI without trying recommended		MRI without trying recommended treatments			
treatments first such	as physical therapy	first,	such as physical therapy.		
Number of Patients	1	Num	ber of Patients		Memo

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Table Name	Physical: Revised CS	V	Physical:	Business		
(Back to Table Listing)	Flat File		Data.Medicare.gov			
	Outpatient Imaging		Use Of Medical Imaging	Outpatien	nt Imaging	
	Efficiency Measures		Measures		y Hospital Results	
Description		ficienc	y measures hospital-level result		•	
CSV Revised File C			.Medicare.gov Column Name		DDB Data Type	
Footnote 1		Footr	note		Memo	
Outpatients who had	a follow-up	Outpa	atients who had a follow-up		Memo	
	asound within 45 days	mamı	mogram or ultrasound within 4:	5 days		
after a screening man	mmogram	after	a screening mammogram.			
Number of Patients 2	2	Num	ber of Patients Who Had a Follo	ow-up	Memo	
Footnote 2		Footr	note (2)		Memo	
Outpatient CT scans of the abdomen that		Outpatient CT scans of the abdomen that were			Memo	
were "combination" (double) scans		"combination" (double) scans.				
Number of Patients 3		Num	ber of Patients Who Had Comb	ination	Memo	
		Scans	S			
Footnote 3		Footr	note (3)		Memo	
	of the chest that were	Outpatient CT scans of the chest that were			Memo	
"combination" (doub		"combination" (double) scans.				
Number of Patients	4	Number of Outpatients Who Had			Memo	
		Coml	bination Chest Scans			
Footnote 4		Footr	note (4)		Memo	
	cardiac imaging stress	Outpatients who got cardiac imaging stress		Memo		
tests before low-risk	outpatient surgery	tests	before low-risk outpatient surge	ery		
Number of Patients 5		Number of Patients 5			Memo	
Footnote 5		Footnote (5)			Memo	
Outpatients with brain CT scans who got a		Outpatients with brain CT scans who got a			Memo	
sinus CT scan at the	same time	sinus CT scan at the same time				
Number of Patients	5 <u></u>	Number of Patients 6			Memo	
Footnote 6		Footr	note (6)		Memo	

Table Name	Physical: Revised CS	V	Physical:	Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Outpatient Imaging		Use Of Medical Imaging -	Outpatien	t Imaging	
	Efficiency Measures - S	State	State	Efficiency	y State Results	
Description	Outpatient Imaging Eff	Outpatient Imaging Efficiency measures state-level results				
CSV Revised File Column Name		Data.Medicare.gov Column Name		DDB Data Type		
State		State			Text(50)	
Outpatients with low	back pain who had an	Outpatients with low back pain who had an		Memo		
MRI without trying		MRI without trying recommended treatments				
treatments first such	as physical therapy	first s	such as physical therapy.			
Outpatients who had	a follow-up	Outp	Outpatients who had a follow-up		Memo	
mammogram or ultra	asound within 45 days	mam	mmogram or ultrasound within 45 days			
after a screening man	mmogram	after	a screening mammogram.			

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Outpatient Imaging		Use Of Medical Imaging -	Outpatien	t Imaging
	Efficiency Measures - S	State	State	Efficiency	State Results
Description	Outpatient Imaging Eff	icienc	y measures state-level results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Outpatient CT scans	Outpatient CT scans of the abdomen that		atient CT scans of the abdomen	Memo	
were "combination"	(double) scans	"com	bination" (double) scans.		
Outpatient CT scans	of the chest that were	Outpatient CT scans of the chest that were		Memo	
"combination" (doub	ole) scans	"com	bination" (double) scans.		
Outpatients who got	cardiac imaging stress	Outpatients who got cardiac imaging stress		Memo	
tests before low-risk outpatient surgery		tests before low-risk outpatient surgery			
Outpatients with brain CT scans who got a O		Outpatients with brain CT scans who got a		Memo	
sinus CT scan at the	same time	sinus	CT scan at the same time		

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Outpatient Imaging U		Use Of Medical Imaging -	Outpatien	t Imaging
	Efficiency Measures -		National	Efficiency National Results	
	National				
Description	Outpatient Imaging Eff	icienc	y measures national results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Measure Name Mea		Meas	Measure Name		Memo
Score		Score	2		Text(50)

Table Name	Physical: Revised CSV		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File 1		Data.Medicare.gov		
	Process of Care Measu	res -	Hospital Process of Care	Process of	f Care—
	Children		Measures - Children's	Children'	s Asthma Care
			Asthma	Hospital I	Results
Description	Process of Care—Child	dren's	Asthma Care measures hospita	l-level resul	lts
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	;	DDB Data Type
Provider Number		Provi	ider Number		Memo
Hospital Name	ospital Name H		vital Name	Memo	
Address 1	A		ress 1	Memo	
Address 2	ess 2		ress 2		Memo
Address 3		Address 3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP (Code		Text(5)
County Name		Coun	County Name		Text(25)
Phone Number		Phon	Phone Number		Text(10)
Percent of Children	Who Received	Percent of Children Who Received Reliever			Memo
Reliever Medication	While Hospitalized	Medication While Hospitalized for Asthma			
for Asthma					

Table Name (Back to Table Listing)	Physical: Revised CS' Flat File	V	Physical: Data.Medicare.gov	Business	
(Buck to Tubic Bisting)	Process of Care Measu	res -	Hospital Process of Care		
	Children	105	Measures - Children's		s Asthma Care
			Asthma	Hospital F	
Description	Process of Care—Child	dren's	Asthma Care measures hospital	-level resul	ts
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Number of Patients	1	Num	ber of Patients		Memo
Footnote 1		Footnote			Memo
Percent of Children	Percent of Children Who Received		ent of Children Who Received S	Memo	
Systemic Corticoster	roid Medication While	Corticosteroid Medication While Hospitalized			
Hospitalized for Ast	hma	for Asthma			
Number of Patients 2	2	Num	ber of Patients-2	Memo	
Footnote 2		Footi	ootnote-2		Memo
Percent of Children	and their Caregivers	Perce	Percent of Children and their Caregivers Who		Memo
Who Received a Hor	me Management Plan	Received a Home Management Plan of Care			
of Care Document V	of Care Document While Hospitalized for		Document While Hospitalized for Asthma		
Asthma					
Number of Patients 3	3	Number of Patients-3		Memo	
Footnote 3		Footi	note-3		Memo

Table Name	Physical: Revised CSV		Physical:	Business	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Process of Care Measu	res –	Hospital Process of Care	Process of	f Care—Heart	
	Heart Attack		Measures - Heart Attack	Attack Ho	ospital Results	
Description	Process of Care—Hear	t Attac	k measures hospital-level resul	ts		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type	
Provider Number		Provi	der Number		Memo	
Hospital Name		Hosp	ital Name		Memo	
Address 1		Addr	ess 1		Memo	
Address 2		Addr	ess 2		Memo	
Address 3		Addr	ess 3		Memo	
City		City			Memo	
State		State			Text(2)	
ZIP Code		ZIP Code			Text(5)	
County Name		County Name			Text(25)	
Phone Number		Phone Number			Text(10)	
Percent of Heart Atta	ack Patients Given	Percent of Heart Attack Patients Given		en	Memo	
Aspirin at Discharge	:	Aspirin at Discharge				
Number of Patients 2	2	Numl	ber of Patients-2		Memo	
Footnote 2		Footr	note-2		Memo	
Percent of Heart Attack Patients Given		Percent of Heart Attack Patients Given		ven	Memo	
Fibrinolytic Medicat	ion Within 30 Minutes	Fibrinolytic Medication Within 30 Minutes		Ainutes		
Of Arrival		Of Arrival				
Number of Patients 6	5	Numl	ber of Patients-6		Memo	

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Process of Care Measur	res –	es – Hospital Process of Care Process of		f Care—Heart
	Heart Attack		Measures - Heart Attack		ospital Results
Description		1	k measures hospital-level resul		
CSV Revised File C	Column Name		.Medicare.gov Column Name		DDB Data Type
Footnote 6			note-6		Memo
	ack Patients Given PCI		ent of Heart Attack Patients Giv	en PCI	Memo
Within 90 Minutes 0			in 90 Minutes Of Arrival		
Number of Patients	7	Num	ber of Patients-7		Memo
Footnote 7			note-7		Memo
Average number of			age number of minutes before		Memo
-	st pain or possible heart		tients with chest pain or possib	le heart	
attack got an ECG			k got an ECG		
Number of Patients	8		ber of Patients 8		Memo
Footnote 8		Footr			Memo
Average number of		Average number of minutes before			Memo
	st pain or possible heart	outpatients with chest pain or possible heart			
	red to another hospital	attack were transferred to another hospital			
Number of Patients	9		ber of Patients 9		Memo
Footnote 9		Footnote 9			Memo
Outpatients with che		Outpatients with chest pain or possible heart			Memo
heart attack who got	aspirin within 24	attack who got aspirin within 24 hours of			
hours of arrival		arriva	··-		
Number of Patients	<u>11 </u>	Number of Patients-11			Memo
Footnote 11			note-11		Memo
Outpatients with che			atients with chest pain or possib		Memo
heart attack who got	-	1	who got drugs to break up blo	od clots	
blood clots within 30			n 30 minutes of arrival		
Number of Patients	12		ber of Patients-12		Memo
Footnote 12			note-12		Memo
	s Given a Prescription		Attack Patients Given a Prescr	iption for	Memo
	for a Statin at Discharge		tin at Discharge		
Number of Patients	13		ber of Patients-13		Memo
Footnote 13		Footnote-13			Memo
Median Time to Fibr		Median Time to Fibrinolysis			Memo
Number of Patients	10		ber of Patients 10		Memo
Footnote 10		Footnote 10			Memo

Table Name (Back to Table Listing)	Physical: Revised CS Flat File	V	Physical: Data.Medicare.gov	Business	
,	Process of Care Measu	res –	Hospital Process of Care	Process of	f Care—Heart
	Heart Failure		Measures - Heart Failure		ospital Results
Description	Process of Care—Hear	t Failu	re measures hospital-level resu		1
CSV Revised File (.Medicare.gov Column Name		DDB Data Type
Provider Number			der Number		Memo
Hospital Name		Hosp	ital Name		Memo
Address 1		Addr	ess 1		Memo
Address 2		Addr	ess 2		Memo
Address 3		Addr	ess 3		Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County Name		County Name			Text(25)
Phone Number		Phone Number			Text(10)
Percent of Heart Fai	lure Patients Given an	Percent of patients who were given an			Memo
Evaluation of Left V	entricular Systolic	evaluation of Left Ventricular Systolic			
(LVS) Function		Dysfunction (LVSD)			
Number of Patients	1	Number of Patients			Memo
Footnote 1		Footnote			Memo
Percent of Heart Fai			ent of Heart Failure Patients Gi		Memo
	RB for Left Ventricular	1	itor or ARB for Left Ventricula	ar Systolic	
Systolic Dysfunction			unction (LVSD)		
Number of Patients	2		ber of Patients-2		Memo
Footnote 2		Footnote-2			Memo
Percent of Heart Failure Patients Given		Percent of Heart Failure Patients Given			Memo
Discharge Instructio		Discharge Instructions			2.5
Number of Patients	3	Number of Patients-3			Memo
Footnote 3		Footnote-3			Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
(<u>Such to Tue to Bishing</u>)	Process of Care Measur	res –	Hospital Process of Care	Process of	f Care—
	Pneumonia		Measures - Pneumonia	Pneumon	ia Hospital Results
Description	Process of Care—Pneu	monia	measures hospital-level results		
CSV Revised File C	CSV Revised File Column Name		Data.Medicare.gov Column Name		DDB Data Type
Provider Number		Provider Number			Memo
Hospital Name		Hospital Name			Memo
Address 1		Address 1		Memo	
Address 2		Address 2			Memo
Address 3	Address 3		Address 3		Memo
City		City			Memo
State		State			Text(2)

Table Name (Back to Table Listing)	The state of the s		Physical: Data.Medicare.gov	Business	
	Process of Care Measur	res –	Hospital Process of Care	Process of	f Care—
	Pneumonia		Measures - Pneumonia	Pneumoni	a Hospital Results
Description	Process of Care—Pneu	monia	measures hospital-level results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
ZIP Code		ZIP C	Code		Text(5)
County Name		Coun	ty Name		Text(25)
Phone Number		Phone Number			Text(10)
Percent of Pneumoni	ia Patients Whose				Memo
Initial ER Blood Cul	ture Was Performed	Percent of Pneumonia Patients Whose Initial			
Prior To Administrat	tion Of First Dose Of	ER Blood Culture Was Performed Prior To			
Antibiotics		Administration Of First Dose Of Antibiotics			
Number of Patients 2	2	Number of Patients 2			Memo
Footnote 2		Footnote 2			Memo
Percent of Pneumonia Patients Given the		Perce	ent of Pneumonia Patients Giver	n the	Memo
Most Appropriate Initial Antibiotic(s)		Most Appropriate Initial Antibiotic(s)			
Number of Patients 4	1	Number of Patients 4			Memo
Footnote 4		Footnote 4			Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business	
	Process of Care Measures –		Hospital Process of Care	Process of	f Care—Surgical
	SCIP		Measures - Surgical Care		rovement Project
			Improvement Project	Hospital F	Results
Description	Process of Care—Surg	ical Ca	are Improvement Project measu	ires hospital	l-level results
CSV Revised File C	Column Name	Data	.Medicare.gov Column Nam	e	DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name		Hosp	ital Name		Memo
Address 1		Addr	ess 1		Memo
Address 2		Addr	ess 2		Memo
Address 3		Address 3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County Name		County Name			Text(25)
Phone Number		Phone Number			Text(10)
Surgery patients who	were given an	Percent of Surgery Patients given an antibiotic			Memo
	t time (within one hour	at the right time (within one hour before			
before surgery) to he	elp prevent infection	surgery) to help prevent infection			
Number of Patients	1	Number of Patients-1			Memo
Footnote 1		Footnote-1			Memo
Surgery patients whose preventive		Percent of Surgery Patients whose preventive			Memo
antibiotics were stop		antibiotics were stopped at the right time			
(within 24 hours after	er surgery)	(within 24 hours after surgery)			

Table Name	Physical: Revised CSV	V	Physical:	Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Process of Care Measur	res –	Hospital Process of Care	Process of	f Care—Surgical	
	SCIP		Measures - Surgical Care Care I		Improvement Project	
			Improvement Project Hospital R		Results	
Description			re Improvement Project measur		-level results	
CSV Revised File C			Medicare.gov Column Name		DDB Data Type	
Number of Patients 2	2		per of Patients-2		Memo	
Footnote 2		Footn			Memo	
	were given the right		nt of Surgery Patients who wer	-	Memo	
kind of antibiotic to	help prevent infection		ght kind of antibiotic to help pr	event		
		infect				
Number of Patients 3	3		per of Patients-3		Memo	
Footnote 3		Footn			Memo	
	atment at the right time		nt of Surgery Patients who got		Memo	
(within 24 hours before		_	ht time (within 24 hours before	or after		
surgery) to help prev			ry) to help prevent blood clot			
Number of Patients 4	<u>4</u>		per of Patients-4		Memo	
Footnote 4		Footn			Memo	
Surgery patients who			nt of Surgery Patients whose de		Memo	
treatments to preven			ed treatments to prevent blood	clots after		
certain types of surge		certain types of surgeries				
Number of Patients 5	5		per of Patients-5		Memo	
Footnote 5		Footnote-5			Memo	
	ts whose blood sugar	Percent of all Heart Surgery Patients whose			Memo	
_	ept under good control	blood sugar is kept under good control in the				
in the days right afte		days right after surgery				
Number of Patients 6	5	Number of Patients-6			Memo	
Footnote 6		Footn			Memo	
The percent of surge	* -	Percent of Surgery Patients whose urinary			Memo	
•	re removed on the first		ters were removed on the first of	or second		
or second day after s			fter surgery		3.6	
Number of Patients	11		per of Patients 11		Memo	
Footnote 11	. 1		note 11	, 1	Memo	
Surgery patients who		_	ery patients who were taking he	_	Memo	
0	ockers before coming to		l beta blockers before coming to	o the		
the hospital who wer			tal who were kept on them		Maria	
Number of Patients 8	8		per of Patients 8		Memo	
	Footnote 8		note 8		Memo	
	Outpatients having surgery who got an		atients having surgery who got		Memo	
antibiotic at the right time - within one hour before surgery (higher numbers are		antibiotic at the right time - within one hour				
	(mgner numbers are	befor	e surgery (higher numbers are b	better)		
better)	<u> </u>	NIvara 1	on of Dationts O		Mama	
Number of Patients 9	7		per of Patients 9		Memo	
Footnote 9		Footn	iote 9		Memo	

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File D		Data.Medicare.gov		
	Process of Care Measu	res –	Hospital Process of Care	Process of	f Care—Surgical
	SCIP		Measures - Surgical Care	Care Impi	rovement Project
			Improvement Project	Hospital I	Results
Description	Process of Care—Surg	ical Ca	are Improvement Project measu	res hospita	l-level results
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Outpatients having s	urgery who got the	Outpatients having surgery who got the right			Memo
right kind of antibiot	tic (higher numbers are	kind of antibiotic (higher numbers are better)			
better)					
Number of Patients	10	Number of Patients 10			Memo
Footnote 10		Footr	note 10		Memo
Patients having surg	ery who were actively	Patients having surgery who were actively		Memo	
warmed in the opera	ting room or whose	warmed in the operating room or whose body			
body temperature wa	y temperature was near normal tem		temperature was near normal		
		Number of Patients 13		Memo	
Footnote 13		Footi	note 13		Memo

Table Name	Physical: Revised CSV		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Process of Care Measu	res –	Hospital Process of Care	Process of	f Care State
	State		Measures - State Average	Results	
Description	Process of Care measur	es stat	e-level results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
State		State			Text(2)
Percent of Heart Atta	ack Patients Given	Perce	ent of Heart Attack Patients Giv	en	Memo
Aspirin at Discharge	;	Aspir	in at Discharge		
Percent of Heart Atta	ack Patients Given	Perce	nt of Heart Attack Patients Giv	ren	Memo
Fibrinolytic Medicat	ion Within 30 Minutes	Fibrii	nolytic Medication Within 30 N	I inutes	
Of Arrival		Of Arrival			
Percent of Heart Atta	ack Patients Given PCI	Percent of Heart Attack Patients Given PCI			Memo
Within 90 Minutes C	Of Arrival	Within 90 Minutes Of Arrival			
Percent of Heart Fail	lure Patients Given an	Percent of Heart Failure Patients Given an			Memo
Evaluation of Left V	entricular Systolic	Evaluation of Left Ventricular Systolic (LVS)			
(LVS) Function		Function			
Percent of Heart Fail	lure Patients Given	Percent of Heart Failure Patients Given ACE			Memo
ACE Inhibitor or AF	RB for Left Ventricular	Inhibitor or ARB for Left Ventricular Systolic			
Systolic Dysfunction	ı (LVSD)	Dysft	unction (LVSD)		
Percent of Heart Fail	lure Patients Given	Perce	ent of Heart Failure Patients Given	ven	Memo
Discharge Instructions		Disch	narge Instructions		
Percent of Pneumonia Patients Whose		Percent of Pneumonia Patients Whose Initial			Memo
Initial ER Blood Culture Was Performed		ER Blood Culture Was Performed Prior To			
Prior To Administration Of First Dose Of		Admi	inistration Of First Dose Of An	tibiotics	
Antibiotics					

Table Name	Physical: Revised CS	V	Physical:		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Process of Care Measur	res –	Hospital Process of Care	Process of	f Care State
	State		Measures - State Average	Results	
Description	Process of Care measur	es stat	e-level results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Percent of Pneumoni	ia Patients Given the	Perce	nt of Pneumonia Patients Giver	n the	Memo
Most Appropriate In	itial Antibiotic(s)	Most	Appropriate Initial Antibiotic(s	s)	
Surgery patients who	were given an	Surge	ery patients who were given an	antibiotic	Memo
antibiotic at the right	time (within one hour	at the	right time (within one hour be	fore	
before surgery) to he	lp prevent infection	surge	ry) to help prevent infection		
Surgery patients who	ose preventive	Surge	ery patients whose preventive a	ntibiotics	Memo
antibiotics were stop	ped at the right time	were	stopped at the right time (withi	n 24	
(within 24 hours afte		hours	after surgery)		
Surgery patients who	were given the right	Surge	ery patients who were given the	right	Memo
	help prevent infection	kind o	of antibiotic to help prevent infe	ection	
	atment at the right time		nts who got treatment at the rig		Memo
(within 24 hours before	ore or after their	(with	in 24 hours before or after their	surgery)	
surgery) to help prev	rent blood clots	to hel	p prevent blood clots		
Surgery patients who	ose doctors ordered	Surgery patients whose doctors ordered			Memo
treatments to preven		treatments to prevent blood clots after certain			
certain types of surge		types of surgeries			
	ts whose blood sugar		surgery patients whose blood	-	Memo
	ept under good control	(blood glucose) is kept under good control in			
in the days right afte		the days right after surgery			
The percent of surge		The percent of surgery patients whose urinary			Memo
1	re removed on the first	catheters were removed on the first or second			
or second day after s		day after surgery			
Surgery patients who	_	Surgery patients who were taking heart drugs			Memo
	ckers before coming to	called beta blockers before coming to the			
the hospital, who we			tal who were kept on them		
Percent of Children		Percent of Children Who Received Reliever			Memo
Reliever Medication	While Hospitalized	Medi	cation While Hospitalized for A	Asthma	
for Asthma					
Percent of Children			ent of Children Who Received S	•	Memo
•	oid Medication While		costeroid Medication While Ho	spitalized	
Hospitalized for Astl			sthma		
	Percent of Children and their Caregivers		nt of Children and their Caregi		Memo
Who Received a Home Management Plan		Received a Home Management Plan of Care			
of Care Document While Hospitalized for		Document While Hospitalized for Asthma			
Asthma					3.5
Outpatients having s		_	atients having surgery who got		Memo
	time - within one hour		otic at the right time - within o		
before surgery (high	er numbers are better)	before	e surgery (higher numbers are l		

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business		
(Buck to Tuote Bisting)	Process of Care Measur	res –			Process of Care State	
	State		Measures - State Average	Results		
Description	Process of Care measur	es stat	e-level results			
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type	
Outpatients having s right kind of antibiot better)	urgery who got the ic (higher numbers are	_	atients having surgery who got of antibiotic (higher numbers an	_	Memo	
	Average number of minutes before outpatients with chest pain or possible heart		age number of minutes before tients with chest pain or possib got an ECG	le heart	Memo	
outpatients with ches	Average number of minutes before outpatients with chest pain or possible heart attack were transferred to another hospital		age number of minutes before tients with chest pain or possib were transferred to another ho	Memo		
Median Time to Fibr	rinolysis	Median Time to Fibrinolysis			Memo	
Outpatients with che heart attack who got hours of arrival	aspirin within 24	Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival			Memo	
Outpatients with che heart attack who got blood clots within 30	drugs to break up	Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival		Memo		
Heart Attack Patients Given a Prescription for a Statin at Discharge		Heart Attack Patients Given a Prescription for a Statin at Discharge			Memo	
Patients having surgery who were actively warmed in the operating room or whose body temperature was near normal		Patients having surgery who were actively warmed in the operating room or whose body temperature was near normal		Memo		

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Process of Care Measur	res –	Hospital Process of Care	Process of	f Care National
	National		Measures - National	Results	
			Average		
Description	Process of Care measur	res nati	ional results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Measure name		Meas	Measure name		Memo
Condition		Cond	Condition		Memo
Category	ry Categ		gory		Memo
National Process of	Care Rate	Natio	onal Process of Care Rate		Memo

Table Name (Back to Table Listing)	Physical: Revised CS' Flat File	V	Physical: Data.Medicare.gov	Business	
(<u></u>	READMISSION_RED	UCT	Hospital Readmission	Readmiss	ion Reduction
	ION		Reduction	Hospital F	Results
Description	Readmission Reduction	n meas	ures hospital-level results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Hospital Name		Hosp	ital Name		Memo
Provider Number		Provi	Provider Number		Memo
State		State		Text(2)	
Measure Name		Meas	Measure Name		Memo
Number of Discharges		Num	ber of Discharges		Memo
Footnote		Footr	note		Memo
Excess Readmission	Ratio	Excess Readmission Ratio		Memo	
Predicted Readmission Rate		Predicted Readmission Rate		Memo	
Expected Readmission Rate		Expected Readmission Rate		Memo	
Number of Readmissions		Number of Readmissions		Memo	
Start Date		Start Date		Memo	
End Date		End Date		Memo	

Table Name	Physical: Revised CSV		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Structural Measures		Hospital Structural	Structural Hospital R	esults
			Measures - Cardiac Surgery		
			Registry		
Description	Structural measures ho	spital-l	level results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	DDB Dat	a Type
Provider Number		Provi	ider Number	Memo	
Hospital Name		Hospital Name		Memo	
Address 1		Addr	ress 1	Memo	
Address 2		Addr	ress 2	Memo	
Address 3		Addr	ress 3	Memo	
City		City		Memo	
State		State		Text(2)	
ZIP Code		ZIP (Code	Text(5)	
County Name		County Name		Text(25)	
Phone Number		Phone Number		Text(10)	
Measure Name		Measure Name		Memo	
Measure Response		Meas	sure Response	Memo	

Table Name (Back to Table Listing)	Physical: Revised CS	V	Physical:	Business	
(Back to Table Listing)	Flat File		Data.Medicare.gov		~
	Measure Crosswalk			Measure (Crosswalk
Description	Hospital Compare mea	sure cr	rosswalk		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Provider Number					Memo
Hospital Name					Memo
State					Text(2)
Condition					Memo
Measure Code					Memo
Measure Name					Memo
Score					Memo
Sample					Memo
Footnote					Memo

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
			Hospital Compare -	Hospital C	Compare -
			CASPER/ASPEN Contacts	CASPER	ASEN Contacts
Description	Hospital Compare measure crosswalk				
CSV Revised File Column Name		Data.Medicare.gov Column Name		;	DDB Data Type
		State			Memo
		Com	pare Tool		Memo
		E-ma	il Address		Memo
		Phon	e		Memo

Appendix A - Hospital Compare Measures

Timely and Effective Care Acute Myocardial Infarction

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

Heart Failure

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

Pneumonia

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

Children's Asthma Care

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

Surgical Care Improvement

Measure ID	Measure Description
SCIP-Inf-1a	Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision
SCIP-Inf-2a	Percent of Surgery Patients who Received the Appropriate Preventative Antibiotic(s)
	for Their Surgery
SCIP-Inf-3a	Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After
	Surgery
SCIP-Inf-4	Heart surgery patients whose blood sugar (blood glucose) is kept under good control in
	the days right after surgery
SCIP-Inf-9	Surgery patients whose urinary catheter was removed on the first or second day after
	surgery.
SCIP-Inf-10	Patients having surgery who were actively warmed in the operating room or whose
	body temperature was near normal by the end of surgery.
SCIP-VTE-1	Surgery Patients Whose Doctors Ordered Treatments to Prevent Blood Clots (Venous
	Thromboembolism) For Certain Types of Surgeries
SCIP-VTE-2	Surgery Patients Who Received Treatment To Prevent Blood Clots Within 24 Hours
	Before or after Selected Surgeries to Prevent Blood Clots
SCIP-Card-2	Percent of surgery patients who were taking heart drugs called beta blockers before
	coming to the hospital, who were kept on the beta blockers during the period just
	before and after their surgery
OP-6	Outpatients having surgery who got an antibiotic at the right time – within one hour
	before surgery
OP-7	Outpatients having surgery who got the right kind of antibiotic

Emergency Department

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

Preventative Care

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

Readmissions, Complications, and Deaths

30–Day Mortality and Readmissions

Measure ID	Measure Description
MORT-30-AMI	Acute Myocardial Infarction 30–Day Mortality Rate
MORT-30-HF	Heart Failure 30–Day Mortality Rate
MORT-30-PN	Pneumonia 30–Day Mortality Rate
READM-30-AMI	Acute Myocardial Infarction 30–Day Readmission Rate
READM-30-HF	Heart Failure 30–Day Readmission Rate
READM-30-PN	Pneumonia 30–Day Readmission Rate
Hip/ Knee	30-day readmission rate following elective primary total hip arthroplasty (THA) and/or
Readmission	total knee arthroplasty (TKA)
HWR	30-day hospital-wide all- cause unplanned readmission
Hip/Knee	Hospital level risk-standardized complication rate (RSCR) following elective primary
Complications	total hip arthoplasty (THA) and total knee arthroplasty (TKA)

AHRQ Patient Safety Indicators (PSIs)

Measure ID	Measure Description
PSI-04	Death Among Surgical Patients with Serious, Treatable Complications
PSI-06	Iatrogenic Pneumothorax
PSI-12	Post–Operative Pulmonary Embolism (PE) or Deep Vein Thrombosis (DVT)
PSI-14	Postoperative Wound Dehiscence
PSI-15	Accidental Puncture or Laceration
PSI-90	Complication/Patient Safety for Selected Indicators

Healthcare-Associated Infections (HAIs)

110010110011011011011011011011011011011	
Measure ID	Measure Description
HAI-1	Central-line associated bloodstream infection (CLABSI)
HAI-2	Catheter-associated urinary tract infection (CAUTI)
HAI-3	Surgical site infections from colon surgery (SSI: Colon)
HAI-4	Surgical site infections from abdominal hysterectomy (SSI: Hysterectomy)

Structural Measures

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

Number of Medicare Patients and Medicare Payment

Measure Description
Number of Medicare patient discharges for selected MS–DRGs
Spending per hospital patient with Medicare: Medicare spending per beneficiary

Outpatient Imaging Efficiency

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

Hospital Readmissions Reduction Program

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

Hospital Value-Based Purchasing

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

Hospital-Acquired Conditions (HACs)

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

Appendix B – HCAHPS Survey Question Listing

Composite Topics

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

Individual Topics

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

Overall Ratings

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

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

#	Question
Q19	During this hospital stay, did doctors, nurses or other hospital staff talk with you about whether you would
	have the help you needed when you left the hospital?
Q20	During this hospital stay, did you get information in writing about what symptoms or health problems to
	look out for after you left the hospital?
Q21	Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible,
	what number would you use to rate this hospital during your stay?
Q22	Would you recommend this hospital to your friends and family?
Q23	During this hospital stay, staff took my preferences and those of my family or caregiver into account in
	deciding what my health care needs would be when I left?
Q24	When I left the hospital, I had a good understanding of the things I was responsible for in managing my
	health.
Q25	When I left the hospital, I clearly understood the purpose for taking each of my medications.
Q26	During this hospital stay, were you admitted to this hospital through the Emergency Room?
Q27	In general, how would you rate your overall health?
Q28	In general, how would you rate your overall mental or emotional health?
Q29	What is the highest grade or level of school that you have completed?
Q30	Are you of Spanish, Hispanic or Latino origin or descent?
Q31	What is your race? Please choose one or more.
Q32	What language do you mainly speak at home?

$Appendix \ C-Footnote \ Crosswalk$

Hospital Compare Footnote Values

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

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

ID	Footnote Text
3	Data were collected during a shorter time period (fewer quarters) than the maximum possible time
	for this measure.
	Each rate reflects the care given over a specific time period, up to a maximum of four quarters during
	a 12 month period. The number of quarters of data available is determined by when hospitals first
	began to report data using a specific measure. This footnote indicates that the hospital's rate was based on data from fewer than the maximum possible number of quarters that the measure was
	generally collected.
4	Suppressed for one or more quarters by CMS.
	Hospitals are required to submit accurate, reportable data to the Centers for Medicare and Medicaid
	Services (CMS). The rates for these measures were calculated by excluding data that had been
	suppressed for one or more quarters because they were identified as inaccurate.
5	No data are available from the hospital for this measure.
	Hospitals volunteer to provide data for reporting on Hospital Compare. This footnote is applied when
	the hospital did not submit any cases for a measure.
6	Fewer than 100 patients completed the HCAHPS survey. Use these scores with caution, as the
	number of surveys may be too low to reliably assess hospital performance.
	The number of completed surveys the hospital or its vendor provided to CMS is less than 100.
7	Survey results are based on less than 12 months of data.
	This footnote is applied when HCAHPS results are based on less than 12 months of survey data.
8	Survey results are not available for this reporting period.
	This footnote is applied when a hospital did not participate in HCAHPS, did not collect sufficient
	HCAHPS data for public reporting purposes, or chose to suppress their HCAHPS results.
9	No or very few patients were eligible for the HCAHPS Survey.
	This footnote is applied when a hospital has no patients eligible to participate in the HCAHPS survey.
10	A state average was not calculated because too few hospitals in the state submitted data.
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	This footnote is applied when too few hospitals submitted data.
11	There were discrepancies in the data collection process.
	This footnote is applied when there have been deviations from HCAHPS data collection protocols.
	CMS is working with survey vendors and/or hospitals to correct this situation.
12	Very few patients were eligible for the HCAHPS survey. The scores shown reflect fewer than 50
	completed surveys. Use these scores with caution, as the number of surveys may be too low to
	reliably assess hospital performance.
	This footnote is applied when the number of completed surveys the hospital or its vendor provided to
	CMS is less than 50.

ID	Footnote Text
13	These measures are included in the composite measure calculations but Medicare is not reporting
	them at this time.
14	No data are available for publication from the hospital for this measure because there were zero
	central line days.
15	No data are available for publication from the hospital for this measure because this hospital does
	not have ICU locations.
16	The number of cases is too small (fewer than 10) to reliably tell how well the hospital is performing.
17	No data are available from the hospital for this measure.
18	Number of cases is too small (fewer than 25) to report and excess readmission ratio.
19	The hospital is not included in the Hospital Readmissions Reduction Program.
20	Data aren't available for this reporting as the hospital is a new member of the surgical registry and
	didn't have an opportunity to submit any cases for the measure.
21	Data aren't available for the voluntary public reporting of this measure.
†	"0 patients" The notation "0 patients" is applied when no patients met the criteria for inclusion in that
	particular measure's calculation.