Medicare Physician & Other Practitioners - by Provider Data Dictionary

Term Name	Variable Name	Definition
National Provider Identifier	Rndrng_NPI	National Provider Identifier (NPI) for the rendering provider on the claim. The provider NPI is the numeric identifier registered in NPPES.
Last Name/Organization Name of the Provider	Rndrng_Prvdr_Last_Org_Name	When the provider is registered in NPPES as an individual (entity type code='I'), this is the provider's last name. When the provider is registered as an organization (entity type code = 'O'), this is the organization name.
First Name of the Provider	Rndrng_Prvdr_First_Name	When the provider is registered in NPPES as an individual (entity type code='I'), this is the provider's first name. When the provider is registered as an organization (entity type code = 'O'), this will be blank.
Middle Initial of the Provider	Rndrng_Prvdr_MI	When the provider is registered in NPPES as an individual (entity type code='I'), this is the provider's middle initial. When the provider is registered as an organization (entity type code = 'O'), this will be blank.
Credentials of the Provider	Rndrng_Prvdr_Crdntls	When the provider is registered in NPPES as an individual (entity type code='I'), these are the provider's credentials. When the provider is registered as an organization (entity type code = 'O'), this will be blank.
Gender of the Provider	Rndrng_Prvdr_Gndr	When the provider is registered in NPPES as an individual (entity type code='I'), this is the provider's gender. When the provider is registered as an organization (entity type code = 'O'), this will be blank.
Entity Type of the Provider	Rndrng_Prvdr_Ent_Cd	Type of entity reported in NPPES. An entity code of 'I' identifies providers registered as individuals and an entity type code of 'O' identifies providers registered as organizations.
Street Address 1 of the Provider	Rndrng_Prvdr_St1	The first line of the provider's street address, as reported in NPPES.
Street Address 2 of the Provider	Rndrng_Prvdr_St2	The second line of the provider's street address, as reported in NPPES.
City of the Provider	Rndrng_Prvdr_City	The city where the provider is located, as reported in NPPES.
State Abbreviation of the Provider	Rndrng_Prvdr_State_Abrvtn	The state where the provider is located, as reported in NPPES. The fifty U.S. states and the District of Columbia are reported by the state postal abbreviation. The following values are used for all other areas:
State FIPS Code of the Provider	Rndrng_Prvdr_State_FIPS	FIPS code for rendering provider's state.

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Term Name	Variable Name	Definition
Zip Code of the Provider	Rndrng_Prvdr_Zip5	The provider's zip code, as reported in NPPES.
RUCA Code of the Provider	Rndrng_Prvdr_RUCA	Rural-Urban Commuting Area Codes (RUCAs), are a Census tract-based classification scheme that utilizes the standard Bureau of Census Urbanized Area and Urban Cluster definitions in combination with work commuting information to characterize all of the nation's Census tracts regarding their rural and urban status and relationships. The Referring Provider ZIP code was cross walked to the United States Department of Agriculture (USDA) 2010 Rural-Urban Commuting Area Codes.
RUCA Description	Rndrng_Prvdr_RUCA_Desc	Description of Rural-Urban Commuting Area (RUCA) Code
Country Code of the Provider	Rndrng_Prvdr_Cntry	The country where the provider is located, as reported in NPPES. The country code will be 'US' for any state or U.S. possession. For foreign countries (i.e., state values of 'ZZ'), the provider country values include the following:
Provider Type of the Provider	Rndrng_Prvdr_Type	Derived from the provider specialty code reported on the claim. For providers that reported more than one specialty code on their claims, this is the specialty code associated with the largest number of services.
Medicare Participation Indicator	Rndrng_Prvdr_Mdcr_Prtcptg_Ind	Identifies whether the provider participates in Medicare and/or accepts assignment of Medicare allowed amounts. The value will be 'Y' for any provider that had at least one claim identifying the provider as participating in Medicare or accepting assignment of Medicare allowed amounts within HCPCS code and place of service. A non-participating provider may elect to accept Medicare allowed amounts for some services and not accept Medicare allowed amounts for other services.
Number of HCPCS	Tot_HCPCS_Cds	Total number of unique HCPCS codes.

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Term Name	**Variable Name**	**Definition**
Number of Medicare Beneficiaries	Tot_Benes	Total Medicare beneficiaries receiving services from the provider. The beneficiary counts reported in the demographic sub-groups (i.e., age, sex, race and entitlement) may not aggregate to the 'Number of Unique Beneficiaries' due to the suppression of beneficiaries fewer than 11 within the demographic sub-groups. In addition, a small percentage of beneficiaries are reflected in the "Number of Unique Beneficiaries" but are not reflected in the beneficiary demographic information due to the lack of demographic information available at the time of reporting.
Number of Services	Tot_Srvcs	Total provider services.
Total Submitted Charge Amount	Tot_Sbmtd_Chrg	The total charges that the provider submitted for all services.
Total Medicare Allowed Amount	Tot_Mdcr_Alowd_Amt	The Medicare allowed amount for all provider services. This figure is the sum of the amount Medicare pays, the deductible and coinsurance amounts that the beneficiary is responsible for paying, and any amounts that a third party is responsible for paying.
Total Medicare Payment Amount	Tot_Mdcr_Pymt_Amt	Total amount that Medicare paid after deductible and coinsurance amounts have been deducted for all the provider's line item services.
Total Medicare Standardized Payment Amount	Tot_Mdcr_Stdzd_Amt	Total amount that Medicare paid after deductible and coinsurance amounts have been deducted for the line item service and after standardization of the Medicare payment has been applied. Standardization removes geographic differences in payment rates for individual services, such as those that account for local wages or input prices and makes Medicare payments across geographic areas comparable, so that differences reflect variation in factors such as physicians' practice patterns and beneficiaries' ability and willingness to obtain care.

Medicare Physician & Other Practitioners - by Provider Data Dictionary		
Term Name	**Variable Name**	**Definition**
Drug Suppress Indicator	Drug_Sprsn_Ind	Identifies whether the utilization, cost and payment information associated with HCPCS codes for drug services as listed on the Medicare Part B Drug Average Sales Price (ASP) list have been suppressed. An '*' identifies that the suppressed information is based on fewer than 11 beneficiaries and a '#' identifies that the information has been counter suppressed to prevent the re-calculation of information suppressed due to fewer than 11 beneficiaries. For example, if the information associated with Drug services has been suppressed because fewer than 11 beneficiaries received these services from a provider, then the information associated with Medical services must also be suppressed so that the information associated with Drug services cannot be recalculated by subtracting the Medical values from the provider's overall values.
Number of HCPCS Associated With Drug Services	Drug_Tot_HCPCS_Cds	Total number of HCPCS codes for drug services, as defined from the Medicare Part B Drug ASP File.
Number of Medicare Beneficiaries With Drug Services	Drug_Tot_Benes	Total Medicare beneficiaries receiving drug services, as defined from the Medicare Part B Drug ASP File.
Number of Drug Services	Drug_Tot_Srvcs	Total drug services, as defined from the Medicare Part B Drug ASP File.
Total Drug Submitted Charge Amount	Drug_Sbmtd_Chrg	The total charges that the provider submitted for drug services, as defined from the Medicare Part B Drug ASP File.
Total Drug Medicare Allowed Amount	Drug_Mdcr_Alowd_Amt	The Medicare allowed amount for drug services, as defined from the Medicare Part B Drug ASP File. This figure is the sum of the amount Medicare pays, the deductible and coinsurance amounts that the beneficiary is responsible for paying, and any amounts that a third party is responsible for paying.
Total Drug Medicare Payment Amount	Drug_Mdcr_Pymt_Amt	Total amount that Medicare paid after deductible and coinsurance amounts have been deducted for all the provider's line item drug services, as defined from the Medicare Part B Drug ASP File.

Medicare Physician & Other Practitioners - by Provider Data Dictionary

Term Name	Variable Name	Definition
Total Drug Medicare Standardized Payment Amount	Drug_Mdcr_Stdzd_Amt	Total amount that Medicare paid after deductible and coinsurance amounts have been deducted for the line item drug service, as defined from the Medicare Part B Drug ASP File and after standardization of the Medicare payment has been applied. Standardization removes geographic differences in payment rates for individual services, such as those that account for local wages or input prices and makes Medicare payments across geographic areas comparable, so that differences reflect variation in factors such as physicians' practice patterns and beneficiaries' ability and willingness to obtain care.
Medical Suppress Indicator	Med_Sprsn_Ind	Identifies whether the utilization, cost and payment information associated with HCPCS codes for Medical (non-ASP) services have been suppressed. An '*' identifies that the suppressed information is based on fewer than 11 beneficiaries and a '#' identifies that the information has been counter suppressed to prevent the re-calculation of information suppressed due to fewer than 11 beneficiaries. For example, if the information associated with Medical (non-ASP) services has been suppressed because fewer than 11 beneficiaries received these services from a provider, then the information associated with Drug services must also be suppressed so that the information associated with Medical services cannot be recalculated by subtracting the Drug values from the provider's overall values.
Number of HCPCS Associated With Medical Services	Med_Tot_HCPCS_Cds	Total number of HCPCS codes associated with medical (non-ASP) services.
Number of Medicare Beneficiaries With Medical Services	Med_Tot_Benes	Total Medicare beneficiaries receiving medical (non-ASP) services.
Number of Medical Services	Med_Tot_Srvcs	Total medical (non-ASP) services.
Total Medical Submitted Charge Amount	Med_Sbmtd_Chrg	The total charges that the provider submitted for medical (non-ASP) services.

Medicare Physician & Other Practitioners - by Provider Data Dictionary

Term Name	Variable Name	Definition
Total Medical Medicare Allowed Amount	Med_Mdcr_Alowd_Amt	The Medicare allowed amount for medical (non-ASP) services. This figure is the sum of the amount Medicare pays, the deductible and coinsurance amounts that the beneficiary is responsible for paying, and any amounts that a third party is responsible for paying.
Total Medical Medicare Payment Amount	Med_Mdcr_Pymt_Amt	Total amount that Medicare paid after deductible and coinsurance amounts have been deducted for all of the provider's line item medical (non-ASP) services.
Total Medical Medicare Standardized Payment Amount	Med_Mdcr_Stdzd_Amt	Total amount that Medicare paid after deductible and coinsurance amounts have been deducted for the line item medical (non-ASP) service, as defined from the Medicare Part B Drug ASP File and after standardization of the Medicare payment has been applied. Standardization removes geographic differences in payment rates for individual services, such as those that account for local wages or input prices and makes Medicare payments across geographic areas comparable, so that differences reflect variation in factors such as physicians' practice patterns and beneficiaries' ability and willingness to obtain care.
Average Age of Beneficiaries	Bene_Avg_Age	Average age of beneficiaries. Beneficiary age is calculated at the end of the calendar year or at the time of death.
Number of Beneficiaries Age Less 65	Bene_Age_LT_65_Cnt	Number of beneficiaries under the age of 65. Beneficiary age is calculated at the end of the calendar year or at the time of death.
Number of Beneficiaries Age 65 to 74	Bene_Age_65_74_Cnt	Number of beneficiaries between the ages of 65 and 74. Beneficiary age is calculated at the end of the calendar year or at the time of death.
Number of Beneficiaries Age 75 to 84	Bene_Age_75_84_Cnt	Number of beneficiaries between the ages of 75 and 84. Beneficiary age is calculated at the end of the calendar year or at the time of death.
Number of Beneficiaries Age Greater 84	Bene_Age_GT_84_Cnt	Number of beneficiaries over the age of 84. Beneficiary age is calculated at the end of the calendar year or at the time of death.
Number of Female Beneficiaries	Bene_Feml_Cnt	Number of female beneficiaries.
Number of Male Beneficiaries	Bene_Male_Cnt	Number of male beneficiaries.

Medicare Physician & Other Practitioners - by Provider Data Dictionary

Term Name	Variable Name	Definition
Number of Non-Hispanic White Beneficiaries	Bene_Race_Wht_Cnt	Number of non-Hispanic white beneficiaries. Race/ethnicity information is based on the variable RTI_RACE_CD from the CMS CCW enrollment database. The RTI_RACE_CD variable is based upon a validated algorithm that uses Census surname lists and geography to improve the accuracy of race/ethnicity classification, particularly for those who are Hispanic or Asian/Pacific Islanders.
Number of Black or African American Beneficiaries	Bene_Race_Black_Cnt	Number of non-Hispanic black or African American beneficiaries. Race/ethnicity information is based on the variable RTI_RACE_CD from the CMS CCW enrollment database. The RTI_RACE_CD variable is based upon a validated algorithm that uses Census surname lists and geography to improve the accuracy of race/ethnicity classification, particularly for those who are Hispanic or Asian/Pacific Islanders.
Number of Asian Pacific Islander Beneficiaries	Bene_Race_API_Cnt	Number of Asian Pacific Islander beneficiaries. Race/ethnicity information is based on the variable RTI_RACE_CD from the CMS CCW enrollment database. The RTI_RACE_CD variable is based upon a validated algorithm that uses Census surname lists and geography to improve the accuracy of race/ethnicity classification, particularly for those who are Hispanic or Asian/Pacific Islanders.
Number of Hispanic Beneficiaries	Bene_Race_Hspnc_Cnt	Number of Hispanic beneficiaries. Race/ethnicity information is based on the variable RTI_RACE_CD from the CMS CCW enrollment database. The RTI_RACE_CD variable is based upon a validated algorithm that uses Census surname lists and geography to improve the accuracy of race/ethnicity classification, particularly for those who are Hispanic or Asian/Pacific Islanders.

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Term Name	**Variable Name**	**Definition**
Number of American Indian/Alaska Native Beneficiaries	Bene_Race_NatInd_Cnt	Number of American Indian or Alaska Native beneficiaries. Race/ethnicity information is based on the variable RTI_RACE_CD from the CMS CCW enrollment database. The RTI_RACE_CD variable is based upon a validated algorithm that uses Census surname lists and geography to improve the accuracy of race/ethnicity classification, particularly for those who are Hispanic or Asian/Pacific Islanders.
Number of Beneficiaries With Race Not Elsewhere Classified	Bene_Race_Othr_Cnt	Number of beneficiaries with race not elsewhere classified.
Number of Beneficiaries With Medicare & Medicaid Entitlement	Bene_Dual_Cnt	Number of Medicare beneficiaries qualified to receive Medicare and Medicaid benefits. Beneficiaries are classified as Medicare and Medicaid entitlement if in any month in the given calendar year they were receiving full or partial Medicaid benefits.
Number of Beneficiaries With Medicare Only Entitlement	Bene_Ndual_Cnt	Number of Medicare beneficiaries qualified to receive Medicare only benefits. Beneficiaries are classified as Medicare only entitlement if they received zero months of any Medicaid benefits (full or partial) in the given calendar year.
Percent (%) Of Beneficiaries Identified With ADHD And Other Conduct Disorders	Bene_CC_BH_ADHD_OthCD_V1_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for ADHD and other conduct disorders. Please note that this condition was not updated as part of the 2020 technical expert panel (TEP) to refine and enhance chronic conditions algorithms, hence the V1 component of the variable name. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-other. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.

Medicare Physician & Other Practitioners - by Provider Data Dictionary		
Term Name	**Variable Name**	**Definition**
Percent (%) Of Beneficiaries Identified With Alcohol And Drug Use Disorders	Bene_CC_BH_Alcohol_Drug_V1_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithms for both alcohol use disorder and/or drug use disorder. Please note that this condition was not updated as part of the 2020 technical expert panel (TEP) to refine and enhance chronic conditions algorithms, hence the V1 component of the variable name. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-other. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Percent (%) Of Beneficiaries Identified With Tobacco Use Disorders	Bene_CC_BH_Tobacco_V1_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for tobacco use disorders. Please note that this condition was not updated as part of the 2020 technical expert panel (TEP) to refine and enhance chronic conditions algorithms, hence the V1 component of the variable name. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-other. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.

Medicare Physician & Other Practitioners - by Provider Data Dictionary		
Term Name	**Variable Name**	**Definition**
Percent (%) Of Beneficiaries Identified With Alzheimer's Disease And Non-Alzheimer's Dementia	Bene_CC_BH_Alz_NonAlzdem_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithms for both Alzheimer's disease and/or non-Alzheimer's dementia. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithms for Alzheimer's disease and non-Alzheimer's dementia. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Percent (%) Of Beneficiaries Identified With Anxiety Disorders	Bene_CC_BH_Anxiety_V1_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for anxiety disorders. Please note that this condition was not updated as part of the 2020 technical expert panel (TEP) to refine and enhance chronic conditions algorithms, hence the V1 component of the variable name. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-other. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.

Medicare Physician & Other Practitioners - by Provider Data Dictionary		
Term Name	**Variable Name**	**Definition**
Percent (%) Of Beneficiaries Identified With Bipolar Disorder	Bene_CC_BH_Bipolar_V1_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for bipolar disorders. Please note that this condition was not updated as part of the 2020 technical expert panel (TEP) to refine and enhance chronic conditions algorithms, hence the V1 component of the variable name. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-other. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Percent (%) Of Beneficiaries Identified With Depression, Bipolar Or Other Depressive Mood Disorders	Bene_CC_BH_Mood_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for depression and other depressive mood disorders. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for depressive and other depressive mood disorders. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.

Medicare Physician & Other Practitioners - by Provider Data Dictionary		
Term Name	**Variable Name**	**Definition**
Percent (%) Of Beneficiaries Identified With Major Depressive Affective Disorder	Bene_CC_BH_Depress_V1_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for major depressive affective disorders. Please note that this condition was not updated as part of the 2020 technical expert panel (TEP) to refine and enhance chronic conditions algorithms, hence the V1 component of the variable name. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-other. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Percent (%) Of Beneficiaries Identified With Personality Disorders	Bene_CC_BH_PD_V1_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for personality disorders. Please note that this condition was not updated as part of the 2020 technical expert panel (TEP) to refine and enhance chronic conditions algorithms, hence the V1 component of the variable name. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-other. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.

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Term Name	**Variable Name**	**Definition**
Percent (%) Of Beneficiaries Identified With Post-Traumatic Stress Disorder	Bene_CC_BH_PTSD_V1_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for post-traumatic stress disorders. Please note that this condition was not updated as part of the 2020 technical expert panel (TEP) to refine and enhance chronic conditions algorithms, hence the V1 component of the variable name. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-other. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Percent (%) Of Beneficiaries Identified With Schizophrenia And Other Psychotic Disorders	Bene_CC_BH_Schizo_OthPsy_V1_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for schizophrenia and other psychotic disorders. Please note that this condition was not updated as part of the 2020 technical expert panel (TEP) to refine and enhance chronic conditions algorithms, hence the V1 component of the variable name. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-other. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.

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Term Name	**Variable Name**	**Definition**
Percent (%) Of Beneficiaries Identified With Asthma	Bene_CC_PH_Asthma_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithms for asthma. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for asthma. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Percent (%) Of Beneficiaries Identified With Atrial Fibrillation And Flutter	Bene_CC_PH_Afib_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for atrial fibrillation/flutter. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for atrial fibrillation/flutter. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.

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Term Name	**Variable Name**	**Definition**
Percent (%) Of Beneficiaries Identified With Combined Cancer Flag For 6 Cancer Indicators	Bene_CC_PH_Cancer6_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithms for six cancer types; includes breast cancer, colorectal cancer, endometrial cancer, lung cancer, prostate cancer and urological cancer. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Percent (%) Of Beneficiaries Identified With Chronic Kidney Disease	Bene_CC_PH_CKD_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithms for chronic kidney disease. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for chronic kidney disease. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.

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Term Name	**Variable Name**	**Definition**
Percent (%) Of Beneficiaries Identified With Chronic Obstructive Pulmonary Disease	Bene_CC_PH_COPD_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for COPD. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for COPD. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Percent (%) Of Beneficiaries Identified With Diabetes	Bene_CC_PH_Diabetes_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for diabetes. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for diabetes. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.

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Term Name	**Variable Name**	**Definition**
Percent (%) Of Beneficiaries Identified With Heart Failure And Non-Ischemic Heart Disease	Bene_CC_PH_HF_NonIHD_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for heart failure/non-ischemic heart disease. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for heart failure/non-ischemic heart disease. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Percent (%) Of Beneficiaries Identified With Hyperlipidemia	Bene_CC_PH_Hyperlipidemia_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for hyperlipidemia. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for hyperlipidemia. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.

Medicare Physician & Other Practitioners - by Provider Data Dictionary		
Term Name	**Variable Name**	**Definition**
Percent (%) Of Beneficiaries Identified With Hypertension	Bene_CC_PH_Hypertension_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for hypertension. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for hypertension. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Percent (%) Of Beneficiaries Identified With Ischemic Heart Disease	Bene_CC_PH_IschemicHeart_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for ischemic heart disease. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for ischemic heart disease. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.

Medicare Physician & Other Practitioners - by Provider Data Dictionary		
Term Name	**Variable Name**	**Definition**
Percent (%) Of Beneficiaries Identified With Osteoporosis With Or Without Pathological Fracture	Bene_CC_PH_Osteoporosis_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for osteoporosis. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for osteoporosis. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Percent (%) Of Beneficiaries Identified With Parkinson's Disease And Secondary Parkinsonism To	Bene_CC_PH_Parkinson_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for Parkinson's disease/secondary parkinsonism. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for Parkinson's disease/secondary parkinsonism. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.

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Term Name	**Variable Name**	**Definition**
Percent (%) Of Beneficiaries Identified With Rheumatoid Arthritis / Osteoarthritis	Bene_CC_PH_Arthritis_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for rheumatoid arthritis/osteoarthritis. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for rheumatoid arthritis/osteoarthritis. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Percent (%) Of Beneficiaries Identified With Stroke / Transient Ischemic Attack	Bene_CC_PH_Stroke_TIA_V2_Pct	Percent of beneficiaries meeting the CCW chronic condition algorithm for stroke/transient ischemic attack. In 2020, CMS contracted an technical expert panel (TEP) to refine and enhance the chronic condition algorithms, including the algorithm for stroke/transient ischemic attack. The V2 portion of the variable name indicates that this variable was updated as part of the TEP. Chronic condition metrics are only available for file years 2017 forward. For more details on this condition, see https://www2.ccwdata.org/web/guest/condition-categories-chronic. To protect the privacy of Medicare beneficiaries, the number of beneficiaries fewer than 11 have been suppressed and the percent of beneficiaries between 75% and 100% have been top-coded at 75%.
Average HCC Risk Score of Beneficiaries	Bene_Avg_Risk_Scre	Average Hierarchical Condition Category (HCC) risk score of beneficiaries.