

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
 - Hospital Value-Based Purchasing

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

Hospital Compare Measures Description/Background and Reporting Cycles

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

Name	Structural Measures
Description/	A Structural measure reflects the environment in which providers care for patients. For example,
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/ Background	The HCAHPS Patient Survey is a 32-item survey instrument and data collection methodology 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, www.HCAHPSonline.org.
Reporting Cycle	The collection period for the HCAHPS measures is 12 months. The HCAHPS measures are 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	7/4/0000	20201	6/30/2011
. ohte Virginia		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_05_28_2013
Hvbp_hai_05_28_2013
Hvbp_hcahps_05_28_2013
Hvbp_hf_05_28_2013
Hvbp_pn_05_28_2013
Hvbp_scip_05_28_2013
Hvbp_tps_05_28_2013

MSAccess file name:
Hospital.zip
Hospital.pdf
Readme.txt
Access Table Names
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 c	lataset
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address1		Memo
Address2		Memo
Address3		Memo
City		Memo
State		Text(2)
ZIP Code	·	Text(5)
County Name		Text(25)

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
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
(Back to Table Listing)	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_P	ULMEMB_DVT	Memo
PSI_12_POSTOP_P	ULMEMB_DVT_F	Memo
PSI_14_POSTOP_D	DEHIS	Memo
PSI_14_POSTOP_D	DEHIS_F	Memo
PSI_15_ACC_LAC		Memo
PSI_15_ACC_LAC_	_F	Memo
PSI_90_SAFETY		Memo
PSI_90_SAFETY_F		Memo
PSI_4_SURG_COM	IP_NUM_DC	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_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	UM_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	ULMEMB_DVT_NUM_DC	Memo
PSI_12_POSTOP_P	ULMEMB_DVT_RATE	Memo
	ULMEMB_DVT_LOW_EST	Memo
PSI_12_POSTOP_P	ULMEMB_DVT_HIGH_EST	Memo
PSI_14_POSTOP_D	DEHIS_NUM_DC	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_WORSE		Memo
PSI_6_IAT_PTX_SAME		Memo
PSI_6_IAT_PTX_BETTER		Memo
PSI_6_IAT_PTX_TOOFEW		Memo
PSI_12_POSTOP_PULMEMB_DVT_WORSE		Memo
PSI_12_POSTOP_PULMEMB_DVT_SAME		Memo
PSI_12_POSTOP_PULMEMB_DVT_BETTER		Memo
PSI_12_POSTOP_P	PULMEMB_DVT_TOOFEW	Memo

Table Name	Physical: Access	Business
(Back to Table Listing)	vwHQI_HOSP_AHRQ_STATE	AHRQ PSI State Results
Description	AHRQ PSI measures state-level results	
Column Name		DDB Data Type
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_BETTER		Memo
PSI_90_SAFETY_T	OOFEW	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
Table Name (Back to Table Listing)	dbo_vwHQI_HOSP_ED	Process of Care — Emergency Department
(<u>Back to Table Listing</u>)	doo_vw11Q1_11O3F_ED	Hospital Results
Description	Process of Care—Emergency Department measures hospital-level results	
Column Name		DDB Data Type
prvdr_id		Memo
msr_cd		Memo
scr		Memo
footnote		Memo
Sample		Memo

The Late National	Physical: Access	Business
Table Name	vwHQI_HOSP_ED_State	Process of Care — Emergency Department
(Back to Table Listing)		State Results
Description	Process of Care—Emergency Department measures state-level results	
Column Name		DDB Data Type
prvdr_id		Memo
msr_cd		Memo
scr		Memo
footnote		Memo

7D. 1.1. NI	Physical: Access	Business
Table Name	vwHQI_HOSP_ED_National	Process of Care — Emergency Department
(<u>Back to Table Listing</u>)		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 (Back to Table Listing)	Physical: Access	Business
	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

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

Table Name (Back to Table Listing)	Physical: Access	Business
	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

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

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

The left and the second	Physical: Access	Business
Table Name (Back to Table Listing)	vwHQI_HOSP_HAI_National	Healthcare-Associated Infections National
		Results
Description	Healthcare-Asssicoated Infections 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>)	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 Description		Memo
HCAHPS Answer Percent		Text(50)
Number of Completed Surveys		Text(50)
Survey Response Rate Percent		Text(50)
Footnote		Memo

Table Name	Physical: Access	Business
(Back to Table Listing)	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 C	Code	Text(25)
HCAHPS Answer Description		Memo
HCAHPS Answer Percent		Text(50)

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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_ami _05_28_2013	HVBP Process of Care—AMI Results
Description	Hospital Value-Based Purchasing Acute Myo	cardial Infarction results
Column Name		DDB Data Type
ID		Memo
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
County Name		Memo
State		Memo
ZIP Code		Memo
AMI-7a Performance Rate		Memo
AMI-7a Achievemen	nt Points	Memo
AMI-7a Improvement	nt Points	Memo
AMI-7a Measure Sc	ore	Memo
AMI-8a Performance Rate		Memo
AMI-8a Achievement Points		Memo
AMI Condition/Procedure Score		Memo
AMI-8a Improvement Points		Memo
AMI-8a Measure Sc	ore	Memo

TO LIL NI	Physical: Access	Business
Table Name (Back to Table Listing)	Hvbp_hai_05_28_2013	HVBP Healthcare-Associated Infections
(Back to Table Listing)		Results
Description	Hospital Value-Based Purchasing Healthcare	-Associated Infections results
Column Name		DDB Data Type
ID		Memo
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
County Name		Memo
State		Memo
ZIP Code		Memo
SCIP-Inf-1 Performa	ance Rate	Memo
SCIP-Inf-1 Achieve	ment Points	Memo
SCIP-Inf-1 Improve	ment Points	Memo
SCIP-Inf-1 Measure	Score	Memo
SCIP-Inf-2 Performa		Memo
SCIP-Inf-2 Achieve		Memo
SCIP-Inf-2 Improve		Memo
SCIP-Inf-2 Measure	Score	Memo
SCIP-Inf-3 Performa		Memo
SCIP-Inf-3 Achieve	ment Points	Memo
SCIP-Inf-3 Improvement Points		Memo
SCIP-Inf-3 Measure Score		Memo
SCIP-Inf-4 Performance Rate		Memo
SCIP-Inf-4 Achievement Points		Memo
HAI Condition/Procedure Score		Memo
SCIP-Inf-4 Improve		Memo
SCIP-Inf-4 Measure Score		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_hcahps_05_28_2013	HVBP HCAHPS Results
Description	Hospital Value-Based Purchasing HCAHPS 1	results
Column Name		DDB Data Type
ID		Memo
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
County Name		Memo
State		Memo
ZIP Code		Memo
Communication with Nurses Achievement Points		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_hcahps_05_28_2013	HVBP HCAHPS Results
Description	Hospital Value-Based Purchasing HCAHPS r	results
Column Name		DDB Data Type
	n Nurses Improvement Points	Memo
	n Nurses Dimension Score	Memo
	n Doctors Achievement Points	Memo
	n Doctors Improvement Points	Memo
	n Doctors Dimension Score	Memo
	Iospital Staff Achievement Points	Memo
	Iospital Staff Improvement Points	Memo
	Iospital Staff Dimension Score	Memo
Pain Management A		Memo
Pain Management In	I	Memo
Pain Management D		Memo
	ut Medicines Achievement Points	Memo
	ut Medicines Improvement Points	Memo
Communication about Medicines Dimension Score		Memo
Cleanliness and Quietness of Hospital Environment Achievement Po		Memo
Cleanliness and Quietness of Hospital Environment Improvement Po		Memo
Cleanliness and Quietness of Hospital Environment Dimension Scor		Memo
Discharge Information	on Achievement Points	Memo
Discharge Information	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 Scor	e	Memo
HCAHPS Consisten	cy Score	Memo

m. I.I. Ni.	Physical: Access	Business
Table Name (Back to Table Listing)	H-h- hf 05 29 2012	HVBP Process of Care—Heart Failure
(<u>Back to Table Listing</u>)	Hvbp_hf_05_28_2013	Results
Description	Hospital Value-Based Purchasing Process of	Care—Heart Failure results
Column Name		DDB Data Type
ID		Memo
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
County Name		Memo
State		Memo

Table Name (Back to Table Listing)	Physical: Access	Business
	H.h. hf 05 20 2012	HVBP Process of Care—Heart Failure
(<u>Back to Table Listing</u>)	Hvbp_hf_05_28_2013	Results
Description	Hospital Value-Based Purchasing Process of	Care—Heart Failure results
Column Name		DDB Data Type
ZIP Code		Memo
HF-1 Performance Rate		Memo
HF-1 Achievement Points		Memo
HF-1 Condition/Procedure Score		Memo
HF-1 Improvement Points		Memo
HF-1 Measure Score		Memo

TO LL NI	Physical: Access	Business
Table Name	H 1 05 20 2012	HVBP Process of Care— Pneumonia
(<u>Back to Table Listing</u>)	Hvbp_pn_05_28_2013	Results
Description	Hospital Value-Based Purchasing Pa	rocess of Care—Pneumonia measure results
Column Name		DDB Data Type
ID		Memo
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
County Name		Memo
State		Memo
ZIP Code		Memo
PN-3b Performance	Rate	Memo
PN-3b Achievement	Points	Memo
PN-3b Improvement	Points	Memo
PN-3b Measure Scor	re	Memo
PN-6 Performance Rate		Memo
PN-6 Achievement Points		Memo
PN Condition/Procedure Score		Memo
PN-6 Improvement Points		Memo
PN-6 Measure Score		Memo

TD. L.L. NI.	Physical: Access	Business
Table Name	Hvbp_scip_05_28_2013	HVBP Process of Care—Surgical
(<u>Back to Table Listing</u>)		Improvement Care Program Results
Dogovintion	Hospital Value-Based Purchasing Process of Care—Surgical Improvement Care Program	
Description	results	
Column Name		DDB Data Type
ID		Memo
Provider Number		Memo
Hospital Name		Memo

	Physical: Access	Business
Table Name (Back to Table Listing)	H-h 05 20 2012	HVBP Process of Care—Surgical
(Back to Table Listing)	Hvbp_scip_05_28_2013	Improvement Care Program Results
Description	Hospital Value-Based Purchasing Process of	Care—Surgical Improvement Care Program
Description	results	
Column Name		DDB Data Type
Address		Memo
City		Memo
County Name		Memo
State		Memo
ZIP Code		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 Achiev	vement 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 Condition/Procedure Score		Memo
SCIP-VTE-2 Improvement Points		Memo
SCIP-VTE-2 Measure Score		Memo

Table Name	Physical: Access	Business
(Back to Table Listing)	Hvbp_tps_05_28_2013	HVBP Total Performance Score Results
Description	Overall performance score for Hospital Value	e-Based Purchasing
Column Name		DDB Data Type
ID		Memo
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
County Name		Memo
State		Memo
ZIP Code		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 Score		Memo

Table Name (Back to Table Listing)	Physical: Access	Business
	the marior riogd IMC VWI V	Outpatient Imaging Efficiency Hospital
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_IMG_XWLK	Results
Description	Outpatient Imaging Efficiency measures hosp	ital-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)

(D.11. N	Physical: Access	Business
Table Name (Back to Table Listing)	dbo_vwHQI_STATE_IMG_AVG	Outpatient Imaging Efficiency State
(<u>Back to Table Listing</u>)		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 (Back to Table Listing)	Physical: Access	Business
	dbo_vwHQI_US_NATIONAL_IMG_AVG	Outpatient Imaging Efficiency National
(Back to Table Listing)	dbo_vwiiQi_bs_ivATiONAE_livio_Avd	Results
Description	Outpatient Imaging Efficiency measures national results	
Column Name		DDB Data Type
Condition		Text(22)
Measure Code		Text(25)
Measure Name		Memo
Score		Text(50)

m.ll.N.	Physical: Access	Business
Table Name (Back to Table Listing)	dbo_vwHQI_HOSP_IMM	Process of Care — Immunization Hospital
(Back to Table Listing)		Results
Description	Process of Care—Immunization measures hospital-level results	
Column Name		DDB Data Type
prvdr_id		Memo
msr_cd		Memo
scr		Memo

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

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

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

TO LL NI	Physical: Access	Business
Table Name (Back to Table Listing)	dbo_vwHQI_HOSP_MORTALITY_READ	30-Day Mortality and Readmission
(<u>Back to Table Listing</u>)	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_Compl_Rate		Text(50)
Comparison to National Rate		Text(50)
Lower Mortality_Readm Estimate		Text(50)
Upper Mortality_Readm Estimate		Text(50)
Number of Patients		Text(50)
Footnote		Text(50)

Table Name	Physical: Access	Business
	dbo_vwHQI_STATE_MORTALITY_REA	30-Day Mortality and Readmission State
(Back to Table Listing)	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		Text(50)

Table Name (Back to Table Listing)	Physical: Access	Business
	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_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 re	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
(Back to Table Listing)	dbo_vwHQI_STATE_MPV_MSR	Medicare Volume State Results
Description	Medicare Volume measures state-level results	S
Column Name		DDB Data Type
State		Text(50)
Diagnosis Related G	roup ID	Text(25)
Diagnosis Related Group Name		Memo
Number Of Cases		Text(50)

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

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

Table Name	Physical: Access	Business	
Table Name (Back to Table Listing)	dbo_vwHQI_HOSP_SPP_National	Medicare Spending Per Patient National	
(<u>Back to Table Listing</u>)	doo_vw11Q1_11OSF_SFF_National	Results	
Description Medicare Spending Per Patient measure natio		onal results	
Column Name		DDB Data Type	
prvdr_id		Memo	
msr_cd		Memo	
scr		Memo	
ftnt_value		Memo	

Table Name	Physical: Access	Business	
Table Name (Back to Table Listing)	dbo_vwHQI_HOSP_STRUCTURAL_XW LK	Structural Hospital Results	
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		
(Back to Table Listing)	dbo_vwHQI_HOSP_MSR_XWLK	Process of Care Hospital Results		
Description	Process of Care measures hospital-level results			
Column Name		DDB Data Type		
Provider Number		Memo		
Hospital Name	ital Name Memo			
State		Text(2)		
Condition		Memo		
Measure Code	asure Code Text(25)			
Measure Name		Memo		
Score		Text(50)		
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	
(Back to Table Listing)	dbo_vwHQI_PCTL_MSR_XWLK	Process of Care Top Percentile Scores	
Description	Scores achieved by the top ten (10) percent of hospitals and the national 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	Downloadable Database Dictionary	
readme.txt		
CSV Revised Data File Names (.csv)	Data.Medicare.gov File Names	
Hospital_Data	Hospital_Data	
Measure Dates	Measure Dates	
FootNote	FootNote	
ACS NSQIP Data File - April 2013	ACS NSQIP Data File - April 2013	
Agency for Healthcare Research and Quality -	Agency for Healthcare Research and Quality -	
National	National	
Agency for Healthcare Research and Quality - State	Agency for Healthcare Research and Quality - State	
Agency for Healthcare Research and Quality	Agency for Healthcare Research and Quality	
Emergency Department Throughput	Emergency Department Throughput	
Emergency Department Throughput-National	Emergency Department Throughput-National	
Emergency Department Throughput-State	Emergency Department Throughput-State	
Healthcare_Associated_Infections	Healthcare_Associated_Infections	
Healthcare_Associated_Infections_State	Healthcare_Associated_Infections_State	
Healthcare_Associated_Infections_National	Healthcare_Associated_Infections_National	
Hospital Acquired Condition	Hospital Acquired Condition	
Hospital Acquired Condition - National	Hospital Acquired Condition - National	
HCAHPS Measures - National	HCAHPS Measures - National	
HCAHPS Measures - State	HCAHPS Measures - State	
HCAHPS Measures	HCAHPS Measures	
hvbp_ami_08_16_2013	hvbp_ami_08_16_2013	
hvbp_hai_08_16_2013	hvbp_hai_08_16_2013	
hvbp_hcahps_08_16_2013	hvbp_hcahps_08_16_2013	
hvbp_hf_08_16_2013	hvbp_hf_08_16_2013	
hvbp_pn_08_16_2013	hvbp_pn_08_16_2013	
hvbp_scip_08_16_2013	hvbp_scip_08_16_2013	
hvbp_tps_08_16_2013	hvbp_tps_08_16_2013	
Immunization	Immunization	
Immunization-National	Immunization-National	
Immunization-State	Immunization-State	
Medicare Spending Per Patient	Medicare Spending Per Patient	
Medicare Spending Per Patient - National	Medicare Spending Per Patient - National	
Medicare Spending Per Patient - State	Medicare Spending Per Patient - State	
Spending_Breakdown_by_Claim	Spending_Breakdown_by_Claim	
Medicare Volume Measures - National	Medicare Volume Measures - National	
Medicare Volume Measures - State	Medicare Volume Measures - State	
Medicare Volume Measures	Medicare Volume Measures	

CSV Revised file name:	Data.Medicare.gov	
Hospital_Revised_flatfiles.zip		
Hospital.pdf	Downloadable Database Dictionary	
readme.txt		
CSV Revised Data File Names (.csv)	Data.Medicare.gov File Names	
Outcome Of Care Measures - National	Outcome Of Care Measures - National	
Outcome Of Care Measures - State	Outcome Of Care Measures - State	
Outcome Of Care Measures	Outcome Of Care Measures	
Outpatient Imaging Efficiency Measures - National	Outpatient Imaging Efficiency Measures - National	
Outpatient Imaging Efficiency Measures -State	Outpatient Imaging Efficiency Measures -State	
Outpatient Imaging Efficiency Measures	Outpatient Imaging Efficiency Measures	
Process of Care Measures - Children	Process of Care Measures - Children	
Process of Care Measures - Heart Attack	Process of Care Measures - Heart Attack	
Process of Care Measures - Heart Failure	Process of Care Measures - Heart Failure	
Process of Care Measures - Pneumonia	Process of Care Measures - Pneumonia	
Process of Care Measures - SCIP	Process of Care Measures - SCIP	
Process of Care Measures - State	Process of Care Measures - State	
Process of Care Measures - National	Process of Care Measures - National	
READMISSION REDUCTION	READMISSION REDUCTION	
Structural Measures	Structural Measures	
Measure Crosswalk	Measure Crosswalk	
American_College_of_Cardiology_Percutaneous_Cor	American_College_of_Cardiology_Percutaneous_Cor	
onary_Intervention_PCI_Readmission_Measure	onary_Intervention_PCI_Readmission_Measure	
Hospital_Compare_CASPER_ASPEN_Contacts	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 (Back to Table Listing) Physical: Revised Flat File		d CSV	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	(Back to Table Listing) Hospital_Data		Hospital_Data	Hospital Characteristics	
Description		on on hospi	itals within the dataset		
CSV Revised File C	olumn Name	Data.Med	licare.gov Column Name		DDB Data Type
Provider Number		Provider N	Number		Memo
Hospital Name		Hospital N	Name		Memo
Address 1		Address1	Address1		Memo
Address 2		Address2		Memo	
Address 3		Address3	Address3		Memo
City		City	City		Memo
State		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	Physical: Rev Flat File	rised CSV	Physical: Data.Medicare.gov	Business	S
(Back to Table Listing)	Measure Dates		Measure Dates	Measure Data Collection Periods	
Description	Current collec	tion dates for a	he Downl	oadable Database	
CSV Revised File C	olumn Name	Data.Medica	re.gov Column Name		DDB Data Type
Measure Name		Measure Name			Memo
Measure Start Quarte	r	Measure Start	Quarter		Memo
Measure Start Date		Date		Memo	
Measure End Quarter Measure End		Quarter	•	Memo	
Measure End Date		Measure End	Date	•	Memo

Table Name File		ed CSV Flat	Physical: Data.Medicare.gov	Busines	S	
(Back to Table Listing)	FootNote		FootNote	Footnote	es	
Description	Look up table for	Look up table for footnote text in the various data files				
CSV Revised File C	olumn Name	Data.Medica	re.gov Column Name		DDB Data Type	
Footnote		Footnote			Text (50)	
FootnoteText		Footnote Tex	t		Memo	

Table Name	Physical: Revi	sed CSV	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	-		ACS NSQIP Data File - April 2013	Hospital ACS Measures	
Description	American Colle	ege of Surgeon	is (ACS) hospital-level results		
CSV Revised File C	Column Name	Data.Medica	are.gov Column Name		DDB Data Type
CCN	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 LowExtBypas		ass		Memo	
LowExtBypass_FN		LowExtBypa	ss_FN		Memo

Table Name	•		Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	Agency for Healthcare		Agency for Healthcare	AHRO P	SI Hospital Results
	Research and Quality		Research and Quality	AIIIQI	or mospital Results
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		Hosp	ital Name		Memo
Address 1		Addr	ess 1		Memo
Address 2		Address 2			Memo
Address 3		Address 3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County Name		County Name			Text(25)
Phone Number		Phone	e Number		Text(10)
Death from serious t	reatable complications	Death from serious treatable complication		cations	Memo
after surgery		after surgery			Memo
Footnote - Death fro	Footnote - Death from serious treatable F		Footnote - Death from serious treatable		Memo
complications after s			complications after surgery		IVICIIIO
Collapsed lung due t	o medical treatment	Colla	psed lung due to medical treatr	nent	Memo

	Physical: Revised CS				
Table Name	Flat File		Data.Medicare.gov		
(<u>Back to Table Listing</u>)	Agency for Healthcare		Agency for Healthcare	AHRO PS	SI Hospital Results
	Research and Quality		Research and Quality	r	
Description	AHRQ PSI measures h				
CSV Revised File C			Medicare.gov Column Name		DDB Data Type
-	l lung due to medical		note - Collapsed lung due to me	dical	Memo
treatment		treatn			
Serious blood clots a	<u> </u>		us blood clots after surgery		Memo
	lood clots after surgery		note - Serious blood clots after s		Memo
A wound that splits of	<u> </u>		und that splits open after surger	•	Memo
Footnote - A wound	that splits open after	Footn	note - A wound that splits open	after	Memo
surgery		surge			1,101110
Accidental cuts and	tears from medical		lental cuts and tears from medic	cal	Memo
treatment		treatn			TVICING
	al cuts and tears from		note - Accidental cuts and tears	from	Memo
medical treatment			cal treatment		
Serious Complication			us Complications		Memo
Footnote - Serious C			note - Serious Complications		Memo
Number of Patients -		Number of Patients - Death from serious			Memo
treatable complications after surgery		treatable complications after surgery			
Rate - Death from serious treatable			- Death from serious treatable		Memo
	complications after surgery		lications after surgery		1,101110
Lower Estimate - De		Lower Estimate - Death from serious treatable			Memo
treatable complication		complications after surgery			
Higher Estimate - De		Higher Estimate - Death from serious			Memo
treatable complication	· ·		ble complications after surgery		11101110
	Collapsed lung due to	Number of Patients - Collapsed lung due to			Memo
medical treatment		medical treatment			
Rate - Collapsed lun	g due to medical	Rate - Collapsed lung due to medical			Memo
treatment		treatn			
Lower Estimate - Co	ollapsed lung due to		er Estimate - Collapsed lung due	e to	Memo
medical treatment	11 11 1		cal treatment		
Higher Estimate - Co	ollapsed lung due to	_	er Estimate - Collapsed lung du	e to	Memo
medical treatment	0 1 11 1 1		cal treatment	1	
	Number of Patients - Serious blood clots		ber of Patients - Serious blood of	clots after	Memo
after surgery		surge			3.6
	Rate - Serious blood clots after surgery		- Serious blood clots after surge		Memo
	Lower Estimate - Serious blood clots after		er Estimate - Serious blood clots	satter	Memo
surgery		surge		Ct -	
	erious blood clots after	_	er Estimate - Serious blood clot	s after	Memo
Surgery	A 141 (1')	surge		1:4	
Number of Patients -	- A wound that splits		ber of Patients - A wound that s	piits	Memo
open after surgery		open	after surgery		

Table Name Physical: Revised CSV Flat File		V	Physical: Data.Medicare.gov	Business		
(<u>Back to Table Listing</u>)	Agency for Healthcare		Agency for Healthcare	AHRO P	CI Hogpital Dagulta	
	Research and Quality		Research and Quality	AIIIQ	SI Hospital Results	
Description	AHRQ PSI measures h	ospital	-level results			
CSV Revised File C	Column Name	Data.	.Medicare.gov Column Name		DDB Data Type	
Rate - A wound that surgery	splits open after	Rate	- A wound that splits open after	surgery	Memo	
Lower Estimate - A after surgery	wound that splits open		er Estimate - A wound that split surgery	s open	Memo	
Higher Estimate - A after surgery	Higher Estimate - A wound that splits open		er Estimate - A wound that splingery	Memo		
Number of Patients - tears from medical tr	- Accidental cuts and reatment	Number of Patients - Accidental cuts and tears from medical treatment			Memo	
Rate - Accidental cu medical treatment	ts and tears from	Rate - Accidental cuts and tears from medical treatment			Memo	
Lower Estimate - Ac from medical treatm	ecidental cuts and tears ent	Lower Estimate - Accidental cuts and tears from medical treatment		Memo		
Higher Estimate - A from medical treatm	ccidental cuts and tears ent	Higher Estimate - Accidental cuts and tears from medical treatment		Memo		
Number of Patients - Serious Complications		Number of Patients - Serious Complications		ications	Memo	
Rate - Serious Complications		Rate - Serious Complications		Memo		
Lower Estimate - Se	rious Complications	Lower Estimate - Serious Complications		Memo		
Higher Estimate - Se	erious Complications	Higher Estimate - Serious Complications		Memo		

Table Name	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	Agency for Healthcare		Agency for Healthcare	AHRO PS	SI State Results
	Research and Quality -	State	Research and Quality - State	7 mmQ T	of State Results
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 complications after surgery		Worse - Death from serious treatable complications after surgery			Memo
	Same - Death from serious treatable Sa		e - Death from serious treatable dications after surgery		Memo
Better - Death from somplications after s			r - Death from serious treatable dications after surgery		Memo
	Too few - Death from serious treatable complications after surgery		Too few - Death from serious treatable complications after surgery		Memo
1 0			Worse - Collapsed lung due to medical treatment		Memo
Same - Collapsed luttreatment	ng due to medical	Same treatn	e - Collapsed lung due to medical ment		Memo

Table Name	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business		
(<u>Back to Table Listing</u>)	Agency for Healthcare		Agency for Healthcare	AHRO PS	AHRQ PSI State Results	
	` •		Research and Quality - State	AIIKQI	of State Results	
Description	AHRQ PSI measures st				•	
CSV Revised File C			Medicare.gov Column Name		DDB Data Type	
Better - Collapsed lu	ing due to medical	Bette	r - Collapsed lung due to medic	al	Memo	
treatment		treatn			Wichio	
_	lung due to medical		ew - Collapsed lung due to med	dical	Memo	
treatment		treatn				
	od clots after surgery		e - Serious blood clots after sur		Memo	
Same - Serious blood			- Serious blood clots after surg		Memo	
Better - Serious bloo			r - Serious blood clots after sur	_ •	Memo	
	ood clots after surgery		ew - Serious blood clots after s		Memo	
	Worse - A wound that splits open after		e - A wound that splits open aft	ter	Memo	
Surgery	t anlita onen efter	surge	ı y			
surgery	Same - A wound that splits open after		- A wound that splits open after	Memo		
Better - A wound that	at splits open after	Better - A wound that splits open after			3.4	
surgery		surgery			Memo	
Too few - A wound	that splits open after	Too few - A wound that splits open after			Memo	
surgery		surgery			Wichio	
Worse - Accidental of medical treatment	cuts and tears from	Worse - Accidental cuts and tears from			Memo	
Same - Accidental co	uts and tages from	medical treatment Same - Accidental cuts and tears from				
medical treatment	uts and tears from		cal treatment	111	Memo	
Better - Accidental c	cuts and tears from	Better - Accidental cuts and tears from		M		
medical treatment		medical treatment		Memo		
Too few - Accidental cuts and tears from		Too few - Accidental cuts and tears from		from	Memo	
medical treatment		medical treatment			Mellio	
Worse - Serious Complications		Worse - Serious Complications			Memo	
Same - Serious Com	plications	Same - Serious Complications			Memo	
Better - Serious Com		Better - Serious Complications			Memo	
Too few - Serious Co	omplications	Too f	ew - Serious Complications		Memo	

TO LL NI	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
Table Name (Back to Table Listing) Agency for Healthcare Research and Quality - National			Agency for Healthcare Research and Quality - National	AHRQ PS	SI National Results
Description	AHRQ PSI measures n	ational			
CSV Revised File C	Column Name	Data.Medicare.gov Column Name		DDB Data Type	
Measure N		Measure			Memo
U S National Rate		U.S. National Rate			Memo
National Patient Safe	ety Measure	National Patient Safety Measure Performance		formance	Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	7	Physical: Data.Medicare.gov	Business	
	Agency for Healthcare		Agency for Healthcare		
	Research and Quality -		Research and Quality -	AHRQ PSI National Results	
	National		National		
Description	AHRQ PSI measures na	itional	results		
CSV Revised File Column Name		Data	.Medicare.gov Column Name		DDB Data Type
Performance					

TO LL NO.	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business	
Table Name (Back to Table Listing)			Emergency Department Throughput		f Care— cy Department Results
Description	Process of Care—Emer	rgency	Department measure hospital-	level results	S
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	;	DDB Data Type
Provider ID		Provi	ider ID		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		Coun	County Name		Text(25)
Phone Number		Phon	e Number		Text(10)
Measure N		Measure			Memo
Rate Rate		Rate	Rate		Memo
Sample		Samp	ole		Memo
Footnote		Footi	note		Memo

Table Name	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
	Emergency Department Throughput-State	t	Emergency Department Throughput-State	Process of Emergent State Res	cy Department
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		Measure			Memo
Rate (per 1,000 Discharges)		Rate (per 1,000 Discharges)			Memo
Footnote		Footnote			Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
	Emergency Department Throughput-National	t	Emergency Department Throughput-National	Process of Emergen National	cy Department
Description	Process of Care—Emergency		y Department Hospital Results measure n		tional results
CSV Revised File Column Name		Data	.Medicare.gov Column Name		DDB Data Type
Provider ID		Provider ID			Memo
Measure		Measure			Memo
Rate (per 1,000 Discharges)		Rate (per 1,000 Discharges)			Memo
Footnote		Footnote		Memo	

Table Name	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Healthcare_Associated_		Healthcare Associated	Healthca	re-Associated
	ctions		Infections Infections		s Hospital Results
Description	Healthcare-Associated	Infecti	ons measures hospital-level res	sults	
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			Memo
Address 2		Address 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)
Measure		Measure			Memo
Score		Score			Memo
Footnote	Footnote		note		Memo
		Location			Memo

Table Name Physical: Revised CS Flat File		V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Healthcare_Associated_Infe ctions_State		Healthcare_Associated_Infe	Healthcare-Associated	
			ctions_State	Infection	s State Results
Description	Healthcare-Associated Infecti		ons measures state-level results	3	
CSV Revised File Column Name		Data.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 Flat File		V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Healthcare_Associated	_Infe	Healthcare_Associated_Infe	Healthca	re-Associated
	ctions_National		ctions_National	Infection	s National Results
Description	Healthcare-Associated Infection		ons measures national results		
CSV Revised File Column Name		Data	.Medicare.gov Column Name		DDB Data Type
Provider ID		Provi	der ID		Memo
Measure		Measure			Memo
Rate (per 1,000 Discharges)		Rate (per 1000 Discharges)			Memo
Footnote		Footr	Footnote		Memo

Table Name Physical: Revised CSV Flat File		V	Physical: Data.Medicare.gov	Business	1
(Back to Table Listing)	Hospital Acquired		Hospital Acquired	Hospital-	-Acquired
	Condition		Condition	Condition	ns Hospital Results
Description	Hospital-Acquired Cor	nditions	s measures hospital-level result	S	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	:	DDB Data Type
Provider ID		Provi	der ID		Memo
Hospital Name		Hospital Name			Memo
Address 1		Address 1			Memo
Address 2		Address 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)
Measure		Measure			Memo
Rate (per 1,000 Discharges)		Rate (per 1,000 Discharges)			Memo

Table Name	· ·		Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Hospital Acquired Condition - National		Hospital Acquired	Hospital-Acquired	
			Condition - National	Conditions National Result	
Description	Hospital-Acquired Conditions		s measures national results		
CSV Revised File Column Name		Data.Medicare.gov Column Name)	DDB Data Type
Measure		Measure			Memo
Score		Score			Memo

Table Name Physical: Revised CS' Flat File		V Physical: Data.Medicare.gov		Business	Business	
(<u>Back to Table Listing</u>)	HCAHPS Measures			HCAHP	CAHPS Hospital Results	
Description	HCAHPS measures ho				5 Hospital Results	
CSV Revised File C			Medicare.gov Column Name	ב	DDB Data Type	
Provider Number		Provider Number			Memo	
Hospital Name			ital Name		Memo	
Address 1		Addre			Memo	
Address 2		Addre			Memo	
Address 3		Addre			Memo	
City		City	288 3		Memo	
State		State			Text(2)	
ZIP Code		ZIP C	'ode		Text(5)	
County Name			ty Name		Text(25)	
Phone Number			e Number		Text(23)	
	ho reported that their		nt of patients who reported that	nt their	Τελι(10)	
nurses "Sometimes"			s "Sometimes" or "Never"	it then	Memo	
communicated well.	or rever		nunicated well.		Wichio	
	ho reported that their		nt of patients who reported that	nt their		
nurses "Usually" cor		nurses "Usually" communicated well.			Memo	
	ho reported that their	Percent of patients who reported that their			3.6	
nurses "Always" communicated well.		nurses "Always" communicated well.			Memo	
Percent of patients who reported that their		Perce	nt of patients who reported that	t their		
	doctors "Sometimes" or "Never"		rs "Sometimes" or "Never"		Memo	
communicated well.		communicated well.				
Percent of patients w	ho reported that their	Percent of patients who reported that their			Memo	
doctors "Usually" co	mmunicated well.	doctors "Usually" communicated well.			Memo	
Percent of patients w	ho reported that their	Percent of patients who reported that their			Memo	
doctors "Always" co		doctors "Always" communicated well.			Wichio	
	ho reported that they	Percent of patients who reported that they				
"Sometimes" or "Ne	ver" received help as	"Sometimes" or "Never" received help as			Memo	
soon as they wanted.		soon as they wanted.				
-	ho reported that they	Percent of patients who reported that they		-		
"Usually" received h	elp as soon as they	"Usually" received help as soon as they		hey	Memo	
wanted.		wanted.				
Percent of patients who reported that they		Percent of patients who reported that they		-		
"Always" received help as soon as they		"Always" received help as soon as they		Memo		
wanted.		wanted.				
Percent of patients who reported that their		Percent of patients who reported that their			Mama	
pain was "Sometimes" or "Never" well		pain was "Sometimes" or "Never" well			Memo	
controlled.		controlled.				
-	Percent of patients who reported that their pain was "Usually" well controlled.		nt of patients who reported that	Memo		
		pain was "Usually" well controlled. Percent of patients who reported that their				
_	who reported that their	pain was "Always" well controlled.			Memo	
pain was "Always" v	ven communeu.	Paili \	vas Aiways well collitolled.			

Table Name	Physical: Revised CS		Kiicinacc				
(Back to Table Listing)	Flat File		Data.Medicare.gov				
(Buck to Tubic Listing)	HCAHPS Measures		HCAHPS Measures		HCAHP	S Hospital Results	
Description	eription HCAHPS measures hospital-level results						
CSV Revised File C		Data.	Medicare.gov Column Na	me		DDB Data Type	
Percent of patients w	who reported that staff	Perce	nt of patients who reported	that	staff		
"Sometimes" or "Ne	ver" explained about	"Som	etimes" or "Never" explaine	ed at	out	Memo	
medicines before give	ving it to them.	medic	eines before giving it to their	n.			
	who reported that staff		nt of patients who reported				
"Usually" explained		"Usua	ally" explained about medic	ines	before	Memo	
before giving it to th			g it to them.				
Percent of patients w	who reported that staff		nt of patients who reported				
"Always" explained			ays" explained about medic	ines	before	Memo	
before giving it to th			g it to them.				
	who reported that their		nt of patients who reported				
	were "Sometimes" or		and bathroom were "Somet	imes	s" or	Memo	
"Never" clean.			er" clean.				
_	who reported that their		nt of patients who reported			Memo	
	were "Usually" clean.	room and bathroom were "Usually" clean.				IVICIIIO	
	who reported that their	Percent of patients who reported that their				Memo	
	were "Always" clean.	room and bathroom were "Always" clean.				Wiemo	
Percent of patients w		Percent of patients who reported that the area					
	om was "Sometimes"	around their room was "Sometimes" or			Memo		
or "Never" quiet at n	•		er" quiet at night.				
	who reported that the	Percent of patients who reported that the area					
	om was "Usually" quiet	around their room was "Usually" quiet at				Memo	
at night.		night.					
Percent of patients w		Percent of patients who reported that the area					
	om was "Always" quiet	around their room was "Always" quiet at			Memo		
at night.		night.					
Percent of patients a		Percent of patients who reported that					
reported that YES th	•	YES, they were given information about what			Memo		
information about w	hat to do during	to do during their recovery at home.					
recovery.							
I =	who reported that they	Percent of patients who reported that they			3.6		
l — — — — — — — — — — — — — — — — — — —	mation about what to	were not given information about what to do			Memo		
do during their recov	·	during their recovery at home.					
Percent of patients who gave their hospital			nt of patients who gave their			3.4	
a rating of 6 or lower on a scale from 0			rating of 6 or lower on a scale from 0			Memo	
(lowest) to 10 (higher	•	(lowest) to 10 (highest). Percent of patients who gave their hospital a					
Percent of patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest)			1		•	Mama	
_	a scale from 0 (lowest)	rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest).			est) to	Memo	
to 10 (highest).	oin boonital a matin a -f				na of O		
	neir hospital a rating of		nts who gave their hospital a			Mama	
9 or 10 on a scale fro	om o (rowest) to 10	or 10 on a scale from 0 (lowest) to 10				Memo	
(highest).		(highe	esi).				

Table Name (Back to Table Listing)	•		Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	HCAHPS Measures		HCAHPS Measures	HCAHPS	S Hospital Results
Description	HCAHPS measures ho	spital-l	evel results		
CSV Revised File C	Column Name	Data.	.Medicare.gov Column Name		DDB Data Type
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.		Percent of patients who reported YES, they would probably recommend the hospital.			Memo
Patients who reported YES they would		Percent of patients who reported YES, they would definitely recommend the hospital.			Memo
Number of completed Surveys N		Numl	Number of Completed Surveys		Memo
ı v		Surve	rey Response Rate Percent		Memo
Hospital Footnote		Hosp	pital Footnote		Memo

Table Name	Physical: Revised CS Flat File	V	Physical: Data.Medicare.gov	3		
(Back to Table Listing)	HCAHPS Measures - S	AHPS Measures - State				
Description	HCAHPS measures sta	ite-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 nurses 'Sometimes' of communicated well.	ho reported that their 'n 'Never'	nurse	ent of patients who reported that s "Sometimes" or "Never" nunicated well.	t their	Memo	
Percent of patients w nurses 'Usually' com	ho reported that their municated well.		nt of patients who reported that s "Usually" communicated wel		Memo	
Percent of patients w nurses 'Always' com	who reported that their municated well.		nt of patients who reported that s "Always" communicated wel		Memo	
Percent of patients who reported that their doctors 'Sometimes' or 'Never' communicated well.		Percent of patients who reported that their doctors "Sometimes" or "Never" communicated well.			Memo	
_	Percent of patients who reported that their doctors 'Usually' communicated well.		ent of patients who reported that ors "Usually" communicated we		Memo	
Percent of patients w doctors 'Always' con	who reported that their nmunicated well.	Percent of patients who reported that their doctors "Always" communicated well.			Memo	
Percent of patients who reported that they 'Sometimes' or 'Never' received help as soon as they wanted.		Percent of patients who reported that they "Sometimes" or "Never" received help as soon as they wanted.			Memo	
Percent of patients who reported that they 'Usually' received help as soon as they wanted.		Percent of patients who reported that they "Usually" received help as soon as they wanted.			Memo	
Percent of patients w 'Always' received he wanted.	ho reported that they lp as soon as they		nt of patients who reported tha ays" received help as soon as tl ed.	-	Memo	
Percent of patients w	ho reported that their	Perce	ent of patients who reported tha	t their	Memo	

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	Physical: Data.Medicare.gov	Business			
	HCAHPS Measures - State	HCAHPS Measures - State	HCAHPS State Results			
Description	ICAHPS measures state-level results					

Description HCAHPS measures state-level results							
CSV Revised File C	Column Name	Data.Medicare.gov Column Name	DDB Data Type				
pain was 'Sometimes	s' or 'Never' well	pain was "Sometimes" or "Never" well					
controlled.		controlled.					
Percent of patients v	who reported that their	Percent of patients who reported that their	Memo				
pain was 'Usually' w	ell controlled.	pain was "Usually" well controlled.	Memo				
Percent of patients v	who reported that their	Percent of patients who reported that their	Mama				
pain was 'Always' w	ell controlled.	pain was "Always" well controlled.	Memo				
Percent of patients v	who reported that staff	Percent of patients who reported that staff					
'Sometimes' or 'Nevo	er' explained about	"Sometimes" or "Never" explained about	Memo				
medicines before give	ving it to them.	medicines before giving it to them.					
Percent of patients v	who reported that staff	Percent of patients who reported that staff					
	about medicines before	"Usually" explained about medicines before	Memo				
giving it to them.		giving it to them.					
Percent of patients v	who reported that staff	Percent of patients who reported that staff					
	bout medicines before	"Always" explained about medicines before	Memo				
giving it to them.		giving it to them.					
	who reported that their	Percent of patients who reported that their					
room and bathroom		room and bathroom were "Sometimes" or	Memo				
'Never' clean.		"Never" clean.					
Percent of patients w	who reported that their	Percent of patients who reported that their	M				
room and bathroom	_	room and bathroom were "Usually" clean.	Memo				
Percent of patients w	who reported that their	Percent of patients who reported that their	Mama				
room and bathroom	were 'Always' clean.	room and bathroom were "Always" clean.	Memo				
Percent of patients v	who reported that the	Percent of patients who reported that the area					
area around their roo	om was 'Sometimes' or	around their room was "Sometimes" or	Memo				
'Never' quiet at night	t.	"Never" quiet at night.					
Percent of patients v	who reported that the	Percent of patients who reported that the area					
area around their roo	om was 'Usually' quiet	around their room was "Usually" quiet at	Memo				
at night.		night.					
Percent of patients v	who reported that the	Percent of patients who reported that the area					
area around their roo	om was 'Always' quiet	around their room was "Always" quiet at	Memo				
at night.		night.					
Percent of patients a	t each hospital who	Percent of patients who reported that					
reported that YES th	ey were given	<u> </u>	Memo				
information about what to do during		YES, they were given information about what to do during their recovery at home.	Memo				
recovery.		to do during their recovery at nome.					
Percent of patients v	who reported that they	Percent of patients who reported that they					
_	mation about what to	were not given information about what to do	Memo				
do during their recov		during their recovery at home.					
	who gave their hospital						
a rating of 6 or lowe		rating of 6 or lower on a scale from 0	Memo				
(lowest) to 10 (highe	est).	(lowest) to 10 (highest).					

Table Name	Physical: Revised CS' Flat File	V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	HCAHPS Measures - S	State	HCAHPS Measures - State	HCAHPS	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
Percent of patients w	who gave their hospital	Perce	ent of patients who gave their ho	ospital a	
a rating of 7 or 8 on	a scale from 0 (lowest)	rating	g of 7 or 8 on a scale from 0 (lo	west) to	Memo
to 10 (highest).		10 (highest).			
Patients who gave their hospital a rating of		Percent of patients who gave their hospital a			
9 or 10 on a scale from	om 0 (lowest) to 10	rating of 9 or 10 on a scale from 0 (lowest) to			Memo
(highest).		10 (highest).			
Percent of patients w	who reported NO they	Percent of patients who reported NO,they			Memo
would not recommend the hospital.		would not recommend the hospital.			IVICIIIO
Percent of patients who reported YES they		Percent of patients who reported YES, they			Memo
would probably recommend the hospital.		would probably recommend the hospital.			IVICIIIO
Patients who reported YES they would			ent of patients who reported YE	Mama	
definitely recommen	nd the hospital.	would definitely recommend the hospital.			IVICIIIO

Table Name	able NameFlat File1ack to Table Listing)HCAHPS Measures -1		Physical: Data.Medicare.gov	Business		
(Back to Table Listing)			HCAHPS Measures -	HCAHPS National Results		
			National	IICAIIF	5 Ivational Results	
Description	HCAHPS measures nat	HCAHPS measures national results				
CSV Revised File Column Name		Data.Medicare.gov Column Name			DDB Data Type	
HCAHPS Question		HCAHPS Question			Memo	
HCAHPS Answer Description		HCAHPS Answer Description			Memo	
HCAHPS Answer P	ercent	HCAHPS Answer Percent			Text(50)	

Table Name	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business	
(Back to Table Listing) hvbp_ami_08_16_2013		3	hvbp_ami_08_16_2013	HVBP Process of Care— AMI Results	
Description	1 1	Purcha	sing Acute Myocardial Infarcti	on results	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	e	DDB Data Type
Provider Number		Provi	ider Number		Memo
Hospital Name	Hospital Name		oital Name	Memo	
Address		Address			Memo
City		City			Memo
State		State			Memo
ZIP Code		ZIP Code			Memo
County Name		County Name			Memo
AMI-7a Performance Rate		AMI-7a Performance Rate		Memo	
AMI-7a Achievement Points		AMI-7a Achievement Points			Memo
AMI-7a Improvement Points		AMI-7a Improvement Points			Memo
AMI-7a Measure Sc	ore	AMI-7a Measure Score			Memo

Table Name	· · ·		Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	hvbp_ami_08_16_2013		hvbp_ami_08_16_2013	HVBP Process of Care— AMI Results	
Description	Hospital Value Based Purchas		asing Acute Myocardial Infarction results		
CSV Revised File Column Name		Data.Medicare.gov Column Name			DDB Data Type
AMI-8a Performance	e Rate	AMI-8a Performance Rate			Memo
AMI-8a Achievemen	nt Points	AMI-8a Achievement Points			Memo
AMI-8a Improvemen	nt Points	AMI-8a Improvement Points			Memo
AMI-8a Measure Score		AMI-8a Measure Score			Memo
AMI Condition/Procedure Score		AMI Condition Procedure Score			Memo
		Loca	ation		Memo

T. I.I. N	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business
Table Name (Back to Table Listing)	hvbp_hai_08_16_2013		hvbp_hai_08_16_2013	HVBP Healthcare- Associated Infections Results
Description			sing Healthcare-Associated In	
CSV Revised File C	Column Name		.Medicare.gov Column Nam	e DDB Data Type
Provider Number			der Number	Memo
Hospital Name			ital Name	Memo
Address		Addr	ess	Memo
City		City		Memo
State		State		Memo
ZIP Code		ZIP (Code	Memo
County Name			ty Name	Memo
SCIP-Inf-1 Performa			-Inf-1 Performance Rate	Memo
SCIP-Inf-1 Achiever	ment Points	SCIP	-Inf-1 Achievement Points	Memo
SCIP-Inf-1 Improve			-Inf-1 Improvement Points	Memo
SCIP-Inf-1 Measure			-Inf-1 Measure Score	Memo
SCIP-Inf-2 Performa	ance Rate	SCIP	-Inf-2 Performance Rate	Memo
SCIP-Inf-2 Achiever	ment Points	SCIP	-Inf-2 Achievement Points	Memo
SCIP-Inf-2 Improve			-Inf-2 Improvement Points	Memo
SCIP-Inf-2 Measure	Score	SCIP	-Inf-2 Measure Score	Memo
SCIP-Inf-3 Performa	ance Rate	SCIP	-Inf-3 Performance Rate	Memo
SCIP-Inf-3 Achieven	ment Points	SCIP	-Inf-3 Achievement Points	Memo
SCIP-Inf-3 Improve			-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 Achievement Points S			-Inf-4 Achievement Points	Memo
SCIP-Inf-4 Improve			-Inf-4 Improvement Points	Memo
SCIP-Inf-4 Measure			-Inf-4 Measure Score	Memo
HAI Condition/Proc	edure Score		Condition Procedure Score	Memo
		Loca	tion	Memo

Table Name	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov Busines		ness	
(<u>Back to Table Listing</u>)	hvbp_hcahps_08_16_2	013	hvbp_hcahps_08_16_2013	HVBP HO	CAHPS Results	
Description	Hospital Value-Based I	Purcha	sing HCAHPS 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		Addr	ess		Memo	
City		City			Memo	
State		State			Memo	
ZIP Code		ZIP Code			Memo	
County Name		County Name			Memo	
Communication with Nurses Achievement Points		Communication with Nurses Achievement Points			Memo	
Communication with Points	n Nurses Improvement	Communication with Nurses Improvement Points			Memo	
Communication with Score	n Nurses Dimension	Communication with Nurses Dimension Score			Memo	
Communication with Points	Communication with Doctors Achievement		Communication with Doctors Achievement Points		Memo	
Communication with Doctors Improvement Points		Communication with Doctors Improvement Points			Memo	
Communication with Doctors Dimension Score		Communication with Doctors Dimension Score			Memo	
Responsiveness of Hospital Staff Achievement Points		Responsiveness of Hospital Staff Achievement Points			Memo	

Responsiveness of Hospital Staff

Responsiveness of Hospital Staff Dimension

Communication about Medicines Dimension

Cleanliness and Quietness of Hospital

Cleanliness and Quietness of Hospital

Environment Achievement Points

Environment Improvement Points

Pain Management Achievement Points

Pain Management Improvement Points

Pain Management Dimension Score

Communication about Medicines

Communication about Medicines

Improvement Points

Achievement Points

Improvement Points

Score

Score

Responsiveness of Hospital Staff

Responsiveness of Hospital Staff

Pain Management Achievement Points

Pain Management Improvement Points

Pain Management Dimension Score

Communication about Medicines

Communication about Medicines

Communication about Medicines

Environment Achievement Points

Environment Improvement Points

Cleanliness and Quietness of Hospital

Cleanliness and Quietness of Hospital

Improvement Points

Achievement Points

Improvement Points

Dimension Score

Dimension Score

Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	hvbp_hcahps_08_16_2	013	hvbp_hcahps_08_16_2013	HVBP HO	CAHPS Results
Description	Hospital Value-Based I	Purcha	sing HCAHPS results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	!	DDB Data Type
Cleanliness and Quie	etness of Hospital	Clear	lliness and Quietness of Hospit	al	Memo
Environment Dimen	sion Score	Envir	conment Dimension Score		Memo
Discharge Information	on Achievement Points	Discharge Information Achievement Points			Memo
Discharge Information	on Improvement Points	Discharge Information Improvement Points			Memo
Discharge Information	on Dimension Score	Discharge Information Dimension Score			Memo
Overall Rating of Ho	ospital Achievement	Overall Rating of Hospital Achievement			Memo
Points		Points			
Overall Rating of Ho	ospital Improvement	Overall Rating of Hospital Improvement			Memo
Points		Points			Memo
Overall Rating of Ho	ospital Dimension	Overall Detine of Hearital Dimension Coope		Memo	
Score		Overall Rating of Hospital Dimension Score		on score	Memo
HCAHPS Base Score		HCAHPS Base Score			Memo
HCAHPS Consisten	cy Score	HCAHPS Consistency Score			Memo
		Location			Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Busines Data.Medicare.gov		S	
	hvbp_hf_08_16_2013		hvbp_hf_08_16_2013		ocess of Care— lure Results	
Description			sing Process of Care—Heart F		S	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	ę	DDB Data Type	
Provider Number		Provi	ider Number		Memo	
Hospital Name		Hosp	ital Name		Memo	
Address		Address			Memo	
City		City			Memo	
State		State			Memo	
ZIP Code		ZIP Code			Memo	
County Name		County Name			Memo	
HF-1 Performance R	Rate	HF-1 Performance Rate			Memo	
HF-1 Achievement I	Points	HF-1 Achievement Points		Memo		
HF-1 Improvement l	Points	HF-1 Improvement Points			Memo	
HF-1 Measure Score H		HF-1	HF-1 Measure Score		Memo	
HF-1 Condition/Procedure Score		HF Condition Procedure Score			Memo	
		Loca	tion		Memo	

Table Name	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
Table Name (Back to Table Listing)				HVBP Pro	ocess of Care—
(Back to Table Listing)	hvbp_scip_08_16_2013	3	hvbp_scip_08_16_2013	Surgical C	Care Improvement
				Project Results	
Decemintion	Hospital Value-Based Purchasing Process of Care—Surgical Care Improvement Pro				
Description	results				
CSV Revised File C	Column Name	Data.Medicare.gov Column Name		9	DDB Data Type
Provider Number	Provider Number Pro		Provider Number		Memo
Hospital Name		Hosp	Hospital Name		Memo
Address			Address		Memo
G!		~:			3.5

CSV Revised File Column Name	Data.Medicare.gov Column Name	DDB Data Type
Provider Number	Provider Number	Memo
Hospital Name	Hospital Name	Memo
Address	Address	Memo
City	City	Memo
State	State	Memo
ZIP Code	ZIP Code	Memo
County Name	County Name	Memo
SCIP-Card-2 Performance Rate	SCIP-Card-2 Performance Rate	Memo
SCIP-Card-2 Achievement Points	SCIP-Card-2 Achievement Points	Memo
SCIP-Card-2 Improvement Points	SCIP-Card-2 Improvement Points	Memo
SCIP-Card-2 Measure Score	SCIP-Card-2 Measure Score	Memo
SCIP-VTE-1 Performance Rate	SCIP-VTE-1 Performance Rate	Memo
SCIP-VTE-1 Achievement Points	SCIP-VTE-1 Achievement Points	Memo
SCIP-VTE-1 Improvement Points	SCIP-VTE-1 Improvement Points	Memo
SCIP-VTE-1 Measure Score	SCIP-VTE-1 Measure Score	Memo
SCIP-VTE-2 Performance Rate	SCIP-VTE-2 Performance Rate	Memo
SCIP-VTE-2 Achievement Points	SCIP-VTE-2 Achievement Points	Memo
SCIP-VTE-2 Improvement Points	SCIP-VTE-2 Improvement Points	Memo
SCIP-VTE-2 Measure Score	SCIP-VTE-2 Measure Score	Memo
SCIP Condition/Procedure Score	SCIP Condition Procedure Score	Memo
	Location	Memo

Table Name			Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	hvbp_pn_08_16_2013		hvbp_pn_08_16_2013	HVBP Pro	ocess of Care—
	11v0p_pii_06_10_2013		IIV0P_pii_08_10_2013	Pneumoni	a Results
Description	Hospital Value-Based l	Purcha	sing Process of Care—Pneumo	nia measur	e results
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	;	DDB Data Type
Provider Number		Provi	Provider Number		Memo
Hospital Name		Hospital Name			Memo
Address		Address			Memo
City		City			Memo
State		State			Memo
ZIP Code		ZIP Code		Memo	
County Name		County Name			Memo
PN-3b Performance Rate		PN-3b Performance Rate			Memo
PN-3b Achievement	Points	PN-3b Achievement Points		Memo	

Table Name	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	hvbp_pn_08_16_2013		hvbp_pn_08_16_2013	HVBP Pro Pneumoni	ocess of Care—
Description	Hospital Value-Based I	Purcha	sing Process of Care—Pneumo		
CSV Revised File C			.Medicare.gov Column Name		DDB Data Type
PN-3b Improvement	Points	PN-3b Improvement Points			Memo
PN-3b Measure Scor	e	PN-3b Measure Score			Memo
PN-6 Performance R	ate	PN-6 Performance Rate			Memo
PN-6 Achievement F	Points	PN-6 Achievement Points			Memo
PN-6 Improvement Points		PN-6 Improvement Points			Memo
PN-6 Measure Score		PN-6 Measure Score			Memo
PN Condition/Procedure Score PN		PN C	PN Condition Procedure Score		Memo
		Loca	ntion		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Business Data.Medicare.gov		
	hvbp_tps_08_16_2013		hvbp_tps_08_16_2013	HVBP To Score Res	otal Performance sults
Description	Overall performance so	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	ess		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
		Locat	tion		Memo

TO 11. No.	Flat File		Physical: Data.Medicare.gov	Business	
Table Name (Back to Table Listing)			Immunization	Process o Immuniza Results	f Care— ation Hospital
Description	Process of Care—Imm	unizati	on measures hospital-level res	sults	
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		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		Coun	ty Name	Text(25)	
Phone Number		Phone Number			Text(10)
Measure Meas		Meas	ure	Memo	
Rate	Rate Rate		ate		Memo
Sample Samp		mple		Memo	
Footnote		Footr	note		Memo

Table Name Physical: Revised CSV Flat File		7	Physical: Data.Medicare.gov	Business		
(Back to Table Listing)	Immunization-State		Immunization-State	Process of Care— Immunization State Resul		
Description	Process of Care—Immunization measure state-level results					
CSV Revised File Column Name		Data.Medicare.gov Column Name			DDB Data Type	
Provider ID		Provider ID			Memo	
Measure Meas		easure		Memo		
Rate (per 1,000 Discharges)		Rate	Rate (per 1,000 Discharges)		Memo	
Footnote		Footr	note		Memo	

Table Name	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
Table Name (Back to Table Listing)	Immunization-National		Immunization-National	Process of Care— Immunization National Results	
Description	Process of Care—Imm	unizati	on measures national 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 (ate (per 1,000 Discharges)		Memo	
Footnote			note		Memo

Table Name	Physical: Revised CS' Flat File	V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	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 resu	lts	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	9	DDB Data Type
Provider ID		Provi	ider ID		Memo
Hospital Name		Hosp	ital Name		Memo
Address 1		Addr	ess 1		Memo
Address 2		Address 2			Memo
Address 3		Address 3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code			Text(5)
County Name		County Name			Text(25)
Phone Number		Phone Number			Text(10)
Measure		Measure			Memo
Spending per Hospital Patient with Medicare		Spen	ding per Hospital Patient with	Medicare	Memo
Footnote		Footi	note	Memo	

Table Name Physical: Revised CSV Flat File		V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Medicare Spending Per		Medicare Spending Per	Medicare Spending Per	
	Patient - State		Patient - State	Patient State Results	
Description	Medicare Spending Per Patient measures state-level 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
Score		Score	2		Memo
Footnote		Footr	note		Memo

Table Name	Physical: Revised CSV Flat File	7	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Medicare Spending Per	•	Medicare Spending Per	Medicare	Spending Per
	Patient - National		Patient - National	Patient National Results	
Description	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 Meas		Measure			Memo
Score	Score Score				Memo
Footnote		Footr	note		Memo

Table Name	· ·		Physical: Data.Medicare.gov Busin		ness	
(Back to Table Listing)	Medicare Volume Mea	sures	Medicare Volume Measures	Medicare Volume Hospita 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	ider Number		Memo	
Hospital Name		Hosp	ital Name		Memo	
Address 1		Address 1			Memo	
Address 2		Address 2			Memo	
Address 3		Addr	ress 3		Memo	
City		City			Memo	
State		State			Text(2)	
ZIP Code		ZIP (Code		Text(5)	
County Name		Coun	ity Name		Text(25)	
Phone Number		Phon	e Number		Text(10)	
Diagnosis Related G	roup	Diag	nosis Related Group		Text(25)	
Number Of Cases		Num	ber Of Cases		Text(50)	
Footnote		Footr	note		Memo	

Table Name	Flat File I		Physical: Data.Medicare.gov	Business	
(Back to Table Listing)			Medicare Volume Measures	Medicare	Volume State
- State			- State	Results	
Description	tion Medicare Volume measures s		tate results		
CSV Revised File C	CSV Revised File Column Name		Data.Medicare.gov Column Name		DDB Data Type
State		State			Text(50)
Diagnosis Related Group I		Diagnosis Related Group			Text(25)
Number Of Cases N		Number Of Cases			Text(50)
Footnote		Footr	note		Memo

Table Name	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Medicare Volume Measures M		Medicare Volume Measures	Medicare Volume National	
	- National -		- National	Results	
Description	Medicare Volume measures na		ational results		
CSV Revised File Column Name		Data.Medicare.gov Column Name			DDB Data Type
Diagnosis Related Group		Diagnosis Related Group			Text(25)
Number Of Cases		Number Of Cases			Text(50)

Physical: Revised CSV Flat File			Physical: Data.Medicare.gov	Business		
Table Name (Back to Table Listing)	Outcome Of Care Mea		Outcome Of Care Measures	Readmiss: Results	Mortality and sion Hospital	
Description			ission measures hospital-level r		•	
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		ZIPC	Code		Text(5)	
County Name		Coun	ty Name		Text(25)	
Phone Number		Phon	e Number		Text(10)	
	ath (Mortality) Rates		ital 30-Day Death (Mortality) I	Rates	Memo	
from Heart Attack			Heart Attack		Memo	
_ -	Comparison to U.S. Rate - Hospital 30-Day		parison to U.S. Rate - Hospital	•	Memo	
``**	Death (Mortality) Rates from Heart Attack		n (Mortality) Rates from Heart	Attack	Wiemo	
•	Lower Mortality Estimate - Hospital 30- Day Death (Mortality) Rates from Heart Attack		Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Heart Attack		Memo	
Upper Mortality Esti Day Death (Mortalit Attack	-	Upper Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Heart Attack			Memo	
Number of Patients - Death (Mortality) Ra	- Hospital 30-Day ates from Heart Attack	Number of Patients - Hospital 30-Day Death (Mortality) Rates from Heart Attack			Memo	
Footnote - Hospital 3 (Mortality) Rates from	30-Day Death	Footnote - Hospital 30-Day Death (Mortality) Rates from Heart Attack			Memo	
Hospital 30-Day Dea from Heart Failure	ath (Mortality) Rates	Hospital 30-Day Death (Mortality) Rates from Heart Failure		Memo		
Death (Mortality) Ra	Rate - Hospital 30-Day ates from Heart Failure	Comparison to U.S. Rate - Hospital 30-Day Death (Mortality) Rates from Heart Failure		•	Memo	
Lower Mortality Estimate - Hospital 30- Day Death (Mortality) Rates from Heart Failure		Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Heart Failure		•	Memo	
Upper Mortality Estimate - Hospital 30- Day Death (Mortality) Rates from Heart Failure		Upper Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Heart Failure		•	Memo	
Number of Patients - Death (Mortality) Ra	- Hospital 30-Day ates from Heart Failure	Number of Patients - Hospital 30-Day Death (Mortality) Rates from Heart Failure		-	Memo	
Footnote - Hospital (Mortality) Rates from	30-Day Death	Footr	note - Hospital 30-Day Death (Na from Heart Failure		Memo	

Description Outcome Of Care Measures Outco		Physical: Revised CS' Flat File	V	Physical: Data.Medicare.gov	Business		
Description 30-Day Mortality and Readmission measures hospital-level results		riat File		Data.Wicuicare.gov	30-Day M	Iortality and	
Data Medicare.gov Column Name Hospital 30-Day Death (Mortality) Rates from Pneumonia Hospital 30-Day Death (Mortality) Rates from Pneumonia Comparison to U.S. Rate - Hospital 30-Day Death (Mortality Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Memo Mem	(Back to Table Listing)	Outcome Of Care Mean	sures	Outcome Of Care Measures Readmiss		•	
Hospital 30-Day Death (Mortality) Rates from Pneumonia Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Number of Patients - Hospital 30-Day Death (Mortality) Rates from Pneumonia Number of Patients - Hospital 30-Day Death (Mortality) Rates from Pneumonia Hospital 30-Day Death (Mortality) Rates from Pneumonia Hospital 30-Day Readmission Rates from Pneumonia Hospital 30-Day Readmission Rates from Heart Attack Lower Readmission Rates from Heart Attack Number of Patients - Hospital 30-Day Readmission Rates from Heart Attack Hospital 30-Day Readmission Rates from Heart Failure Lower R				-			
from Pneumonia Comparison to U.S. Rate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Upper Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Upper Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia Number of Patients - Hospital 30-Day Death (Mortality) Rates from Pneumonia Number of Patients - Hospital 30-Day Death (Mortality) Rates from Pneumonia Number of Patients - Hospital 30-Day Death (Mortality) Rates from Pneumonia Number of Patients - Hospital 30-Day Death (Mortality) Rates from Pneumonia Hospital 30-Day Readmission Rates from Pneumonia Hospital 30-Day Readmission Rates from Heart Attack Lower Readmission Estimate - Hospital 30-Day Readmission Rates from Heart Attack Lower Readmission Estimate - Hospital 30-Day Readmission Rates from Heart Attack Number of Patients - Hospital 30-Day Readmission Rates from Pneumonia Hospital 30-Day Readmission Rates from Heart Attack Number of Patients - Hospital 30-Day Readmission Rates from Pneumonia Hospital 30-Day Readmission Rates from Heart Attack Number of Patients - Hospital 30-Day Readmission Rates from Heart Attack Number of Patients - Hospital 30-Day Readmission Rates from Heart Attack Number of Patients - Hospital 30-Day Readmission Rates from Heart Attack Number of Patients - Hospital 30-Day Readmission Rates from Heart Attack Number of Patients - Hospital 30-Day Readmission Rates from Heart Attack Number of Patients - Hospital 30-Day Readmission Rates from Heart Attack Number of Patients - Hospital 30-Day Readmission Rates from Heart Attack Number of Patients - Hospital 30-Day Readmission Rates from Heart Failure Number of Patients - Hospital 30-Day Readmission Rates from Heart Failure Number of Patients - Hospital 30-Day Numb						DDB Data Type	
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Worse than U.S. Nat	tional Rate	Rate			
Number of Hospitals	s whose 30-Day Death	Hospital 30-Day Death (Mortality) Rates			
(Mortality) Rates fro	m Heart Attack are	from Heart Attack - Number of Cases Too			Memo
Number of Cases To	o Small	Small			
Number of Hospitals whose 30-Day Death		Hospital 30-Day Death (Mortality) Rates			
(Mortality) Rates from Heart Failure are		from Heart Failure - Better than U.S. National			Memo
Better than U.S. National Rate		Rate			
_	s whose 30-Day Death	Hospital 30-Day Death (Mortality) Rates			
(Mortality) Rates fro		from Heart Failure - No different than U.S.			Memo
No different than U.S.	S. National Rate	Natio	onal Rate		

Date Name (Back to Table Listing)	Table Name	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
State	Table Name		CHTAC	Č .		lortality and
Description 30-Day Mortality and Readmission measures state-level results	(Buck to Tubic Listing)					=
CSV Revised File Column Name Number of Hospitals whose 30-Day Death (Mortality) Rates from Heart Failure are Worse than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Heart Failure are Number of Cases Too Small Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are Better than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are Better than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are No different than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are Worse than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are Worse than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are Worse than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are Worse than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are No different than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are No different than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are No different than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are No different than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are No different than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are No different than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates National Rate Hospital 30-Day Death (Mortality) Rates from Pneumonia - No different than U.S. National Rate Number of Cases Too Small Hospital 30-Day Death (Mortality) Rates from Pneumonia - No different than U.S. National Rate Number of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia - No different	Description		Readmi			ion state Results
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(Mortality) Rates from Pneumonia are Worse than U.S. National Ratefrom Pneumonia - Worse than U.S. National RateMemoNumber of Hospitals whose 30-Day Death (Mortality) Rates from Pneumonia are Number of Cases Too SmallHospital 30-Day Death (Mortality) Rates from Pneumonia - Number of Cases Too SmallMemoNumber of Hospitals whose 30-day Readmission Rates from Heart Attack are Better than U.S. National RateHospital 30-Day Readmission Rates from Heart Attack - Better than U.S. National RateMemoNumber of Hospitals whose 30-DayHospital 30-Day Readmission Rates fromMemo	different than U.S. N	ational Rate	Natio	nal Rate		
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(Mortality) Rates from Pneumonia are Number of Cases Too Smallfrom Pneumonia - Number of Cases Too SmallMemoNumber of Hospitals whose 30-day Readmission Rates from Heart Attack are Better than U.S. National RateHospital 30-Day Readmission Rates from Heart Attack - Better than U.S. National RateMemoNumber of Hospitals whose 30-DayHospital 30-Day Readmission Rates fromMemo	Worse than U.S. Nat	ional Rate	Rate			
Number of Cases Too Small Number of Hospitals whose 30-day Readmission Rates from Heart Attack are Better than U.S. National Rate Number of Hospitals whose 30-Day Hospital 30-Day Readmission Rates from Heart Attack - Better than U.S. National Rate Hospital 30-Day Readmission Rates from	Number of Hospitals	whose 30-Day Death				
Number of Hospitals whose 30-day Readmission Rates from Heart Attack are Better than U.S. National Rate Number of Hospitals whose 30-Day Hospital 30-Day Readmission Rates from Heart Attack - Better than U.S. National Rate Hospital 30-Day Readmission Rates from	,					Memo
Readmission Rates from Heart Attack are Better than U.S. National Rate Number of Hospitals whose 30-Day Hospital 30-Day Readmission Rates from Heart Attack - Better than U.S. National Rate Hospital 30-Day Readmission Rates from Heart Attack - Better than U.S. National Rate			Small			
Readmission Rates from Heart Attack are Better than U.S. National Rate Heart Attack - Better than U.S. National Rate Number of Hospitals whose 30-Day Hospital 30-Day Readmission Rates from	_		Hospital 30-Day Readmission Rates from			
Number of Hospitals whose 30-Day Hospital 30-Day Readmission Rates from			- ·			Memo
Readmission Rates from Heart Attack are Heart Attack - No different than U.S. National Memo	_	•				
						Memo
No different than U.S. National Rate Rate			Rate			
Number of Hospitals whose 30-Day Hospital 30-Day Readmission Rates from	-	•	Hospital 30-Day Readmission Rates from			3.6
Readmission Rates from Heart Attack are Heart Attack - Worse than U.S. National Rate Memo						Memo
Worse than U.S. National Rate New York of Heavier 20 Person 20 Pe						
Number of Hospitals whose 30-Day Readmission Rates from Heart Attack are Hospital 30-Day Readmission Rates from Memo	_	-	Hospital 30-Day Readmission Rates from		Mama	
Heart Attack - Number of Cases Too Small			Heart	Attack - Number of Cases Too	Small	Memo
Number of Cases Too Small Number of Hospitals whose 30-Day Hospitals whose 30-Day						
Readmission Rates from Heart Failure are Hospital 30-Day Readmission Rates from Memo	_	-	Hosp	ital 30-Day Readmission Rates	from	Memo
Better than U.S. National Rate Heart Failure - Better than U.S. National Rate				Failure - Better than U.S. Nati	onal Rate	INICILIO
Number of Hospitals whose 30-Day Hospital 30-Day Readmission Rates from			Hospital 30-Day Readmission Rates from			
Readmission Rates from Heart Failure are Heart Failure - No different than U.S. Memo	_	-	-			Memo
No different than U.S. National Rate National Rate National Rate						1,101110
Number of Hospitals whose 30-Day						
Readmission Rates from Heart Failure are Hospital 30-Day Readmission Rates from Memo	_	•	_	<u> </u>		Memo
Worse than U.S. National Rate Heart Failure - Worse than U.S. National Rate			Heart	Failure - Worse than U.S. Nat	ional Rate	

Physical: Revised CSV Table Name Flat File			Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	Outcome Of Care Mea	CHTAC	Outcome Of Care Measures	30 Day M	Iortality and
(Buck to Tuble Listing)	- State	suies			ion State Results
Description		Paadmi	ission measures state-level resu		ion State Results
CSV Revised File C			.Medicare.gov Column Name		DDB Data Type
Number of Hospitals		Data	Medicare.gov Column Name		DDB Data Type
_	rom Heart Failure are	Hosp	ital 30-Day Readmission Rates	from	Memo
Number of Cases To		Heart	Failure - Number of Cases To	o Small	Wiemo
Number of Hospitals					
Readmission Rates f	-	_	ital 30-Day Readmission Rates		Memo
Better than U.S. Nat		Pneu	monia - Better than U.S. Nation	nal Rate	Wichio
Number of Hospitals		Hosp	ital 30-Day Readmission Rates	from	
_	rom Pneumonia are No		monia - No different than U.S.		Memo
different than U.S. N		Rate	mome two different than 6.5.	rutionar	Wichio
Number of Hospitals					
Readmission Rates f		_	ital 30-Day Readmission Rates		Memo
Worse than U.S. Nat		Pneui	monia - Worse than U.S. Nation	nal Rate	
Number of Hospitals			. 120 5 5 1	C	
	Readmission Rates from Pneumonia are		ital 30-Day Readmission Rates		Memo
Number of Cases To	o Small	Pneui	monia - Number of Cases Too	Small	
Number of Hospitals whose Rate of		Numl	ber of Hospitals whose Rate of		
readmission after hip or knee surgery are		readn	nission after hip or knee surger	y are	Memo
Better than the U.S.	National Rate	Better than the U.S. National Rate			
Number of Hospitals	s whose Rate of	Number of Hospitals whose Rate of			
readmission after hip	or knee surgery are	readmission after hip or knee surgery are No			Memo
No Different than the		Different than the U.S. National Rate			
Number of Hospitals		Number of Hospitals whose Rate of			
readmission after hip		readmission after hip or knee surgery are			Memo
Worse than the U.S.		Worse than the U.S. National Rate			
Number of Hospitals		Number of Hospitals whose Rate of			
readmission after hip	.	readmission after hip or knee surgery are			Memo
Number of Cases To		Number of Cases Too Small			
Number of Hospitals			ber of Hospitals whose All caus		2.6
_	ission are Better than	_	tal-wide readmission are Better	than the	Memo
the U.S. National Ra		U.S. National Rate			
Number of Hospitals			ber of Hospitals whose All causes		Moms
_	ission are No Different	=		Memo	
	than the U.S. National Rate Number of Hospitals whose All cause		the U.S. National Rate	20	
_			ber of Hospitals whose All causes tal-wide readmission are Worse		Memo
the U.S. National Ra	ission are Worse than	hospital-wide readmission are Worse than the U.S. National Rate			MEHIO
Number of Hospitals			ber of Hospitals whose All caus	20	
_	ission are Number of		tal-wide readmission are Numb		Memo
Cases Too Small	ibbion are mannuel of	_	s Too Small	, CI ()I	14101110
Cases 100 Silian		Cases	, 100 billali		1

Table Name	Physical: Revised CS Flat File	V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Outcome Of Care Mea	sures	Outcome Of Care Measures	30-Day M	ortality and
	- State		- State	Readmissi	ion State Results
Description	30-Day Mortality and I	Readm	ission measures state-level resu	lts	
CSV Revised File Column Name		Data	.Medicare.gov Column Name		DDB Data Type
Number of Hospitals	s whose Complications	Num	ber of Hospitals whose Compli	cations	
and Deaths following hip/knee surgery are		and I	Deaths following hip/knee surge	ery are	Memo
Better than the U.S. National Rate		Better than the U.S. National Rate			
Number of Hospitals whose Complications		Number of Hospitals whose Complications			
and Deaths following	g hip/knee surgery are	and Deaths following hip/knee surgery are No			Memo
No Different than the	e U.S. National Rate	Different than the U.S. National Rate			
Number of Hospitals	s whose Complications	Number of Hospitals whose Complications			
and Deaths following hip/knee surgery are		and Deaths following hip/knee surgery are			Memo
Worse than the U.S. National Rate		Worse than the U.S. National Rate			
Number of Hospitals whose Complications		Number of Hospitals whose Complications			
and Deaths following	g hip/knee surgery are	and Deaths following hip/knee surgery are			Memo
Number of Cases To	o Small	Num	ber of Cases Too Small		

Physical: Revised CSV Flat File		V	Physical: Data.Medicare.gov	Business	
Table Name (Back to Table Listing)	Back to Table Listing) Outcome of Care Measur - National		Outcome of Care Measures - National	30-Day Mortality and Readmission National Results	
Description	30-Day Mortality and F	Readm	ission measures national results	3	
CSV Revised File C	Column Name	Data.Medicare.gov Column Name			DDB Data Type
Condition		Condition			Text(13)
Measure Name		Measure Name			Memo
National Mortality/Readmission Rate		National Mortality/Readmission Rate			Text(50)

Table Name Physical: Revised Flat File		V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Outpatient Imaging		Use Of Medical Imaging	Outpatien	t Imaging
	Efficiency Measures		Measures	Efficiency	Hospital Results
Description	Outpatient Imaging Eff	icienc	y measures hospital-level result	ts	
CSV Revised File C	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			Memo
City	City		City		Memo
State		State			Text(2)
ZIP Code ZII		ZIP (ZIP Code		Text(5)
County Name		County Name			Text(25)

Table Name	Physical: Revised CS Flat File	V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Outpatient Imaging Efficiency Measures		Use Of Medical Imaging Outpatien		t Imaging Hospital Results
Description	Outpatient Imaging Eff	icienc	y measures hospital-level result		•
CSV Revised File C	Column Name	Data	Medicare.gov Column Name		DDB Data Type
Phone Number		Phon	e Number		Text(10)
Outpatients with low	back pain who had an	Outpa	atients with low back pain who	had an	
MRI without trying	recommended		without trying recommended tr	eatments	Memo
treatments first such		first,	such as physical therapy.		
Number of Patients	1	Num	ber of Patients		Memo
Footnote 1		Footr	note		Memo
Outpatients who had	l a follow-up	Outpa	atients who had a follow-up		
_	asound within 45 days		mogram or ultrasound within 4:	5 days	Memo
after a screening man			a screening mammogram.		
Number of Patients 2	2	Number of Patients Who Had a Follow-up			Memo
Footnote 2		Footnote (2)			Memo
	Outpatient CT scans of the abdomen that were "combination" (double) scans		atient CT scans of the abdomen bination" (double) scans.	Memo	
Number of Patients 3	3	Number of Patients Who Had Combination Scans			Memo
Footnote 3		Footnote (3)			Memo
Outpatient CT scans "combination" (doub	of the chest that were	Outpatient CT scans of the chest that were			Memo
Number of Patients		"combination" (double) scans. Number of Outpatients Who Had Combination Chest Scans			Memo
Footnote 4		Footr	note (4)		Memo
	Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery		atients who got cardiac imaging before low-risk outpatient surge		Memo
Number of Patients 5		Number of Patients 5			Memo
Footnote 5		Footnote (5)			Memo
Outpatients with brain CT scans who got a sinus CT scan at the same time		Outpatients with brain CT scans who got a sinus CT scan at the same time			Memo
Number of Patients		Number of Patients 6			Memo
Footnote 6		Footnote (6)			Memo

Table Name	Physical: Revised CS Flat File	V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Outpatient Imaging		Outpatient Imaging	Outpatien	t Imaging
	Efficiency Measures - S	State	Efficiency Measures - 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
State		State			Text(50)
Outpatients with low	back pain who had an	Outpa	atients with low back pain who	had an	
MRI without trying	recommended	MRI	without trying recommended tr	eatments	Memo
treatments first such	as physical therapy	first such as physical therapy.			
Outpatients who had	l a follow-up	Outpatients who had a follow-up			
mammogram or ultra	asound within 45 days	mammogram or ultrasound within 45 days			Memo
after a screening man	mmogram	after a screening mammogram.			
Outpatient CT scans	of the abdomen that	Outpatient CT scans of the abdomen that were			Memo
were "combination"	(double) scans	"combination" (double) scans.			Memo
Outpatient CT scans	of the chest that were	Outpatient CT scans of the chest that were		Memo	
"combination" (double) scans		"combination" (double) scans.			Memo
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			MEIIIO
Outpatients with bra	in 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	Memo	

TO LL NI	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
Table Name (Back to Table Listing)	Outpatient Imaging		Outpatient Imaging	Outpatient Imaging	
(<u>Back to Table Listing)</u>	1		Efficiency Measures -	Efficiency National Results	
			National	Efficiency National Results	
Description	Outpatient Imaging Eff	icienc	y measures national results		
CSV Revised File C	CSV Revised File Column Name		Data.Medicare.gov Column Name		DDB Data Type
Measure Name		Measure Name			Memo
Score		Score			Text(50)

Table Name	· ·		Physical: Data.Medicare.gov	Business	
Table Name (Back to Table Listing)	Process of Care Measures - Children Process of Care—Children's A		Process of Care Measures - Children	Process of Care— Children's Asthma Care	
Description			en's Asthma Care measures hospital-		
CSV Revised File C	Column Name	Data.Medicare.gov Column Name			DDB Data Type
Provider Number		Provider Number			Memo
Hospital Name		Hospital Name			Memo
Address 1		Addr	ess 1		Memo
Address 2		Address 2			Memo
Address 3		Address 3			Memo
City		City			Memo

TO LL N	The state of the s		Physical: Data.Medicare.gov	Business	
Table Name (Back to Table Listing)	Process of Care Measu Children	res -	Process of Care Measures - Children	Process of Children's Hospital F	s Asthma Care
Description		dren's .	Asthma Care measures hospital	l-level resul	lts
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	:	DDB Data Type
State		State			Text(2)
ZIP Code		ZIP (Code		Text(5)
County Name			ty Name		Text(25)
Phone Number		Phon	e Number		Text(10)
Percent of Children Who Received Reliever Medication While Hospitalized for Asthma		Percent of Children Who Received Reliever Medication While Hospitalized for Asthma			Memo
Number of Patients	1	Number of Patients			Memo
Footnote 1		Footnote			Memo
Percent of Children Systemic Corticoster Hospitalized for Ast	roid Medication While	Percent of Children Who Received Systemic Corticosteroid Medication While Hospitalized for Asthma		•	Memo
Number of Patients 2	2	Number of Patients-2			Memo
Footnote 2		Footnote-2			Memo
Percent of Children and their Caregivers Who Received a Home Management Plan of Care Document While Hospitalized for Asthma		Rece	ent of Children and their Caregi ived a Home Management Plan ment While Hospitalized for A	of Care	Memo
Number of Patients 3	3	Number of Patients-3			Memo
Footnote 3		Footr	note-3	-	Memo

Physical: Revised CSV Table Name Flat File		V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Process of Care Measu	res -	Process of Care Measures -	Process of	f Care—Heart
	Heart Attack		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	ider 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		County Name			Text(25)
Phone Number		Phone Number Text(10)			Text(10)

Table Name	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Process of Care Measur	res -	Process of Care Measures -	Process of	f Care—Heart
	Heart Attack		Heart Attack		ospital Results
Description	Process of Care—Hear	t Attac	k measures hospital-level resul		•
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Percent of Heart Atta	ack Patients Given		nt of Heart Attack Patients Giv		Memo
Aspirin at Discharge		Aspir	in at Discharge		Memo
Number of Patients 2	2	Numl	per of Patients-2		Memo
Footnote 2		Footr	note-2		Memo
Percent of Heart Atta	ack Patients Given	Perce	nt of Heart Attack Patients Giv	en	
Fibrinolytic Medicat	ion Within 30 Minutes	Fibrii	nolytic Medication Within 30 N	I inutes	Memo
Of Arrival		Of A	rrival		
Number of Patients 6	6	Numl	per of Patients-6		Memo
Footnote 6		Footr	iote-6		Memo
Percent of Heart Atta	ack Patients Given PCI	Perce	nt of Heart Attack Patients Giv	en PCI	Mama
Within 90 Minutes C	Of Arrival	Withi	in 90 Minutes Of Arrival		Memo
Number of Patients	7	Numl	per of Patients-7		Memo
Footnote 7		Footr	ote-7		Memo
Average number of i	minutes before	Avera	age number of minutes before		
outpatients with ches	st pain or possible heart	outpatients with chest pain or possible heart			Memo
attack got an ECG		attack got an ECG			
Number of Patients 8	8	Numl	per of Patients 8		Memo
Footnote 8		Footr	ote 8		Memo
Average number of 1	minutes before	Average number of minutes before			
outpatients with ches	st pain or possible heart	outpatients with chest pain or possible heart			Memo
attack were transferr	ed to another hospital	attack were transferred to another hospital			
Number of Patients 9	9	Number of Patients 9			Memo
Footnote 9		Footnote 9			Memo
Outpatients with che	est pain or possible	Outpatients with chest pain or possible heart			
heart attack who got	aspirin within 24	attack who got aspirin within 24 hours of			Memo
hours of arrival		arrival			
Number of Patients	11	Number of Patients-11			Memo
Footnote 11			note-11		Memo
Outpatients with che	est pain or possible	Outpa	atients with chest pain or possib	ole heart	
heart attack who got			who got drugs to break up blo	od clots	Memo
blood clots within 30 minutes of arrival			n 30 minutes of arrival		
Number of Patients 12		Number of Patients-12			Memo
Footnote 12			note-12		Memo
Heart Attack Patients Given a Prescription		Heart Attack Patients Given a Prescription for			Memo
for a Statin at Discharge			in at Discharge		IVICIIIO
Number of Patients	13	Number of Patients-13			Memo
Footnote 13		Footr	note-13		Memo
Median Time to Fibr	rinolysis	Medi	an Time to Fibrinolysis		Memo
Number of Patients	10	Numl	ber of Patients 10		Memo

Table Name Physical: Revised CSV Flat File		V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Process of Care Measures -		Process of Care Measures -	Process of	Care—Heart
	Heart Attack H		Heart Attack	Attack Hospital Results	
Description	Process of Care—Hear	t Attac	k measures hospital-level resul	ts	
CSV Revised File Column Name		Data	.Medicare.gov Column Name		DDB Data Type
		Footr	Footnote 10		Memo

Table Name Physical: Revised CSV Flat File		V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Process of Care Measu	res -	Process of Care Measures -	Process of	f Care—Heart
	Heart Failure		Heart Failure	Failure Ho	ospital Results
Description			re measures hospital-level resul		
CSV Revised File C	Column Name		.Medicare.gov Column Name	:	DDB Data Type
Provider Number			der Number		Memo
Hospital Name			ital Name		Memo
Address 1		Addr			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 Fail	lure Patients Given an	Percent of patients who were given an			
Evaluation of Left V	entricular Systolic	evaluation of Left Ventricular Systolic			Memo
(LVS) Function		Dysfunction (LVSD)			
Number of Patients	1	Number of Patients			Memo
Footnote 1		Footnote			Memo
Percent of Heart Fail		Percent of Heart Failure Patients Given ACE			
	RB for Left Ventricular		itor or ARB for Left Ventricula	ar Systolic	Memo
Systolic Dysfunction		_	unction (LVSD)		
Number of Patients 2	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 Instructions		Discharge Instructions			
Number of Patients 3	3	Number of Patients-3			Memo
Footnote 3		Footr	note-3		Memo

Table Name Physical: Revised CSV Flat File		V	Physical: Data.Medicare.gov	Kiiginegg	
(Back to Table Listing)	Process of Care Measu	res -	Process of Care Measures -	Process of	f Care—
	Pneumonia		Pneumonia	Pneumon	ia 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
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		Coun	ty Name		Text(25)
Phone Number		Phon	e Number		Text(10)
Percent of Pneumonia Patients Whose Initial ER Blood Culture Was Performed Prior To Administration Of First Dose Of Antibiotics		Percent of Pneumonia Patients Whose Initial ER Blood Culture Was Performed Prior To Administration Of First Dose Of Antibiotics		rior To	Memo
Number of Patients 2	2	Num	ber of Patients 2		Memo
Footnote 2		Footi	note 2		Memo
Percent of Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)		Percent of Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)			Memo
Number of Patients		Number of Patients 4		,	Memo
Footnote 4		Footi	note 4		Memo

(D. 1.1. N.	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business	
Table Name (Back to Table Listing)	Process of Care Measures - SCIP		Process of Care Measures - SCIP		f Care—Surgical rovement Project Results
Description	Process of Care—Surg	1	are Improvement Project measu		l-level results
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 1		Address 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		Phon	e Number		Text(10)

Table Name	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business		
(Back to Table Listing)	Process of Care Measur SCIP	res -	Process of Care Measures - SCIP		f Care—Surgical rovement Project Results	
Description	Process of Care—Surgi	ical Ca	re Improvement Project measu	res hospital	-level results	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type	
	t time (within one hour	at the	nt of Surgery Patients given an right time (within one hour be		Memo	
before surgery) to he			ry) to help prevent infection		Mana	
Number of Patients	l		per of Patients-1		Memo	
Footnote 1	·•	Footr			Memo	
Surgery patients who antibiotics were stop (within 24 hours after	ped at the right time	antibi	nt of Surgery Patients whose p lotics were stopped at the right in 24 hours after surgery)		Memo	
Number of Patients 2	2	Numl	ber of Patients-2		Memo	
Footnote 2			note-2		Memo	
	Surgery patients who were given the right kind of antibiotic to help prevent infection		nt of Surgery Patients who wer ght kind of antibiotic to help pr tion		Memo	
Number of Patients 3		Numl	per of Patients-3		Memo	
Footnote 3		Footnote-3			Memo	
Patients who got trea	Patients who got treatment at the right time		nt of Surgery Patients who got	treatment		
	(within 24 hours before or after their		ht time (within 24 hours before	or after	Memo	
surgery) to help prev		surgery) to help prevent blood clot				
Number of Patients 4	4	Number of Patients-4			Memo	
Footnote 4		Footnote-4			Memo	
Surgery patients who treatments to preven certain types of surgers	t blood clots after	Percent of Surgery Patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries			Memo	
Number of Patients 3		Number of Patients-5			Memo	
Footnote 5		Footnote-5			Memo	
0 0 1	ts whose blood sugar ept under good control r surgery	Percent of all Heart Surgery Patients whose blood sugar is kept under good control in the days right after surgery			Memo	
Number of Patients (ber of Patients-6		Memo	
Footnote 6		Footr	ote-6		Memo	
The percent of surge urinary catheters were or second day after s	re removed on the first	cathe	nt of Surgery Patients whose u ters were removed on the first of fter surgery		Memo	
Number of Patients			ber of Patients 11		Memo	
Footnote 11		Footnote 11			Memo	
Surgery patients who drugs called beta blo	ockers before coming to	Surgery patients who were taking heart drugs called beta blockers before coming to the			Memo	
the hospital who wer	re kept on them	hospi	tal who were kept on them			

Physical: Revised CSV Flat File		V Physical: Data.Medicare.gov		Business	
(Back to Table Listing)	Process of Care Measur SCIP	res -	Process of Care Measures - SCIP	Process of Care—Surgical Care Improvement Project Hospital Results	
Description	Process of Care—Surg	ical Ca	re Improvement Project measu	res hospital	-level results
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Number of Patients 8	8	Num	ber of Patients 8		Memo
Footnote 8		Footi	note 8		Memo
antibiotic at the right	antibiotic at the right time - within one hour antib		atients having surgery who got iotic at the right time - within o e surgery (higher numbers are l	Memo	
Number of Patients 9	9	Num	ber of Patients 9		Memo
Footnote 9		Footi	note 9	Memo	
Outpatients having s right kind of antibiot better)	surgery who got the tic (higher numbers are	_	atients having surgery who got of antibiotic (higher numbers a	_	Memo
Number of Patients	10	Num	mber of Patients 10		Memo
Footnote 10		Footnote 10			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	
Number of Patients			ber of Patients 13		Memo
Footnote 13		Footr	Footnote 13		Memo

Table Name Physical: Revised CSV Flat File			Physical: Data.Medicare.gov	Business		
(Back to Table Listing)	Process of Care Measu	res -	Process of Care Measures -	Process of	of Care State	
	State		State	Results		
Description	Process of Care measur	res 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	Mama	
Aspirin at Discharge	;	Aspir	Aspirin at Discharge		Memo	
Percent of Heart Atta	ack Patients Given	Percent of Heart Attack Patients Given				
Fibrinolytic Medicat	ion Within 30 Minutes	Fibrinolytic Medication Within 30 Minutes			Memo	
Of Arrival		Of A	rrival			
Percent of Heart Atta	ack Patients Given PCI	Percent of Heart Attack Patients Given PCI			Memo	
Within 90 Minutes C	Of Arrival	With	in 90 Minutes Of Arrival		Memo	
Percent of Heart Fail	lure Patients Given an	Percent of Heart Failure Patients Given an				
Evaluation of Left V	entricular Systolic	Evaluation of Left Ventricular Systolic (LVS)		Memo		
(LVS) Function		Function				
Percent of Heart Fail	lure Patients Given	Percent of Heart Failure Patients Given ACE				
ACE Inhibitor or AF	RB for Left Ventricular	Inhibitor or ARB for Left Ventricular Systolic			Memo	
Systolic Dysfunction	n (LVSD)	Dysfi	unction (LVSD)			

Table Name	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business		
(Back to Table Listing)	Process of Care Measur State	res -	Process of Care Measures - Process of State Results		f Care State	
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 Heart Fail	lure Patients Given	Perce	nt of Heart Failure Patients Given	ven	Memo	
Discharge Instruction	ns	Disch	arge Instructions		Memo	
Percent of Pneumon	ia Patients Whose	Dorgo	nt of Pneumonia Patients Who	co Initial		
Initial ER Blood Cul	lture Was Performed		lood Culture Was Performed P		Memo	
Prior To Administra	tion Of First Dose Of		nistration Of First Dose Of An		Wiemo	
Antibiotics		Adilli	illistration of thist bose of All	uoloues		
Percent of Pneumon	ia Patients Given the	Perce	nt of Pneumonia Patients Give	n the	Memo	
Most Appropriate In	itial Antibiotic(s)	Most	Appropriate Initial Antibiotic(s)	Wichio	
Surgery patients who	o were given an	Surge	ry patients who were given an	antibiotic		
antibiotic at the right	t time (within one hour		right time (within one hour be	fore	Memo	
before surgery) to he			ry) to help prevent infection			
Surgery patients who		_	ry patients whose preventive a			
antibiotics were stop	1	were stopped at the right time (within 24			Memo	
(within 24 hours after		hours after surgery)				
Surgery patients who were given the right		_	ery patients who were given the	_	Memo	
kind of antibiotic to help prevent infection			of antibiotic to help prevent inf		Wichio	
Patients who got treatment at the right time			nts who got treatment at the rig			
(within 24 hours bef		(within 24 hours before or after their surgery)			Memo	
surgery) to help prev		to help prevent blood clots				
Surgery patients who		Surgery patients whose doctors ordered				
treatments to preven		treatments to prevent blood clots after certain			Memo	
certain types of surg			of surgeries			
	ts whose blood sugar		surgery patients whose blood			
	ept under good control		d glucose) is kept under good o	control in	Memo	
in the days right afte			nys right after surgery			
The percent of surge	• •		ercent of surgery patients who	•	3.6	
	re removed on the first		ters were removed on the first of	or second	Memo	
or second day after s	<u> </u>		fter surgery			
Surgery patients who			ry patients who were taking he		3.6	
_	ockers before coming to	called beta blockers before coming to the			Memo	
the hospital, who we		hospital who were kept on them				
Percent of Children		Percent of Children Who Received Reliever		Reliever	Mama	
Reliever Medication	wille Hospitalized	Medi	cation While Hospitalized for A	I Memo		
for Asthma	Who Dooiyad	Domos	nt of Children Who Descind	Protomio		
Percent of Children			nt of Children Who Received S		Memo	
	roid Medication While		costeroid Medication While Ho	spitalized	IVICIIIO	
Hospitalized for Ast	IIIIa	for Asthma				

Table Name			Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Process of Care Measur	res -	Process of Care Measures -	Process of	f Care State
	State		State	Results	
Description	Process of Care measur				
CSV Revised File C		Data	.Medicare.gov Column Name	!	DDB Data Type
Who Received a Horof Care Document W Asthma	Percent of Children and their Caregivers Who Received a Home Management Plan of Care Document While Hospitalized for Asthma		ent of Children and their Caregi ived a Home Management Plan ment While Hospitalized for A	of Care	Memo
_	urgery who got an t time - within one hour er numbers are better)	antibi	atients having surgery who got lotic at the right time - within o e surgery (higher numbers are l	ne hour	Memo
1	Outpatients having surgery who got the right kind of antibiotic (higher numbers are better)		atients having surgery who got of antibiotic (higher numbers a		Memo
_	Average number of minutes before outpatients with chest pain or possible heart attack got an ECG		age number of minutes before tients with chest pain or possib g got an ECG	Memo	
_	minutes before st pain or possible heart ed to another hospital	Average number of minutes before outpatients with chest pain or possible heart attack were transferred to another hospital		Memo	
Median Time to Fibr	rinolysis	Median Time to Fibrinolysis			Memo
	Outpatients with chest pain or possible heart attack who got aspirin within 24		Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival		Memo
Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival		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
warmed in the opera	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 CSV Flat File		V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Process of Care Measu	res -	Process of Care Measures -	Process of	f Care National
	National		National	Results	
Description	Process of Care measures national 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		Categ	gory		Memo
National Process of	Care Rate	Natio	onal Process of Care Rate		Memo

Table Name	Physical: Revised CSV able Name Flat File		Physical: Data.Medicare.gov		Business	
(Back to Table Listing)	READMISSION		READMISSION	Readmiss	ion Reduction	
	REDUCTION		REDUCTION	Hospital I	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	Stat			Text(2)		
Measure Name		Meas	easure Name		Memo	
Number of Discharg	es	Num	Number of Discharges		Memo	
Footnote		Footr	Footnote		Memo	
Excess Readmission	Ratio	Exce	Excess Readmission Ratio		Memo	
Predicted Readmissi	on Rate	Predi	Predicted Readmission Rate		Memo	
Expected Readmissi	Readmission Rate Exp		Expected Readmission Rate		Memo	
Number of Readmissions Numb		ber of Readmissions		Memo		
Start Date		Start	rt Date		Memo	
End Date		End I	l Date		Memo	

Table Name (Back to Table Listing)	Physical: Revised CS Flat File	V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Structural Measures		Structural Measures	Structural	Hospital Results
Description	Structural measures ho	spital-l	level results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	9	DDB Data Type
Provider Number		Provi	ider Number		Memo
Hospital Name		Hosp	ital Name		Memo
Address 1		Address 1			Memo
Address 2	Address 2		ress 2	Memo	
Address 3		Address 3			Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP Code		Text(5)	
County Name		County Name			Text(25)
Phone Number		Phone Number			Text(10)
Measure Name		Measure Name			Memo
Measure Response	·	Measure Response		Memo	

Table Name	Physical: Revised CS Flat File	V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Measure Crosswalk		Measure Crosswalk		f Care Measures
D		C	11-	Crosswall	K
Description	Process of Care Measu				
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	2	DDB Data Type
Provider Number		Provi	rovider Number		Memo
Hospital Name	Hospital Name Ho		oital Name	Memo	
State		State		Text(2)	
Condition		Cond	lition	Memo	
Measure Code		Meas	asure Code		Memo
Measure Name		Meas	leasure Name		Memo
Score	Sco		Score		Memo
Sample Sample		Sample		Memo	
Footnote		Footi	Footnote		Memo

Table Name	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
(Back to Table Listing)	Hospital_Compare_CA	SPE	Hospital Compare -	Hospital (Compare -
	R_ASPEN_Contacts		CASPER/ASPEN Contacts	CASPER/ASEN Contacts	
Description	Lists Hospital Compare CASPER/ASEN Contacts				
CSV Revised File C	Column Name	Data.Medicare.gov Column Name			DDB Data Type
State		State			Memo
Compare Tool		Comp	Compare Tool		Memo
E-mail Address	nil Address E-ma		E-mail Address		Memo
Phone		Phon	e		Memo

Physical: Revised CSV Table Name Flat File		V	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Listing</u>)	Spending_Breakdown_	_by	Spending Breakdown by	Spending	Breakdown by
	Claim		Claim	Claim	
Description	Spending breakdown b	y clain	n		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Hospital Name		Hosp	ital Name		Memo
Provider Number		Provi	rovider Number		Memo
State	State		State		Memo
Period		Perio	eriod		Memo
Claim Type		Clain	Claim Type		Memo
Avg Spending Per E	pisode (Hospital)	Avg	Avg Spending Per Episode (Hospital)		Memo
Avg Spending Per E	pisode (State)	Avg	Avg Spending Per Episode (State)		Memo
Avg Spending Per E	pisode (Nation)	Avg	vg Spending Per Episode (Nation)		Memo
Percent of Spending (Hospital) Perce		ercent of Spending (Hospital)		Memo	
Percent of Spending (State) Perc		Perce	ercent of Spending (State)		Memo
Percent of Spending	(Nation)	Perce	Percent of Spending (Nation)		Memo

		Physical: Revised CSV Flat File	Physical: Data.Medicare.gov	Business		
Table N	Name	American_College_of_Card	American College of	American College of		
(Back to	Table Listing)	iology_Percutaneous_Coron	Cardiology Percutaneous	Cardiology Percutaneous		
		ary_Intervention_PCI_Read	Coronary Intervention (PCI)	Coronary Intervention (PCI)		
		mission_Measure	Readmission Measure	Readmission Measure		
Descrip	ation	American College of Cardiology Percutaneous Coronary Intervention (PCI) R				
Descrip	puon	Measure				

CSV Revised File Column Name	Data.Medicare.gov Column Name	DDB Data Type
MPN	MPN	Memo
Hospital Name	Hospital Name	Memo
STATE	STATE	Memo
Performance Category	Performance Category	Memo
RSRR (Lower 95% CI, Upper 95% CI	RSRR (Lower 95% CI, Upper 95% CI	Memo
Footnote	Footnote	Memo

Appendix A - Hospital Compare Measures

The table below shows the measure identifier, measure as displayed on Hospital Compare, and the file name of measure results in Access database, CSV-Revised database, and Data.Medicare.Gov.

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Structural 1	Measures			
SM_PAR T_CARD	Participates in: Cardiac surgery registry			
SM_PAR T_STROK E	Participates in: Stroke care registry			
SM_PAR T_NURSE	Participates in: Nursing care registry	dbo_vwHQI_HOSP	Characharas	
ACS_REG ISTRY	Participates in: Multispecialty surgical registry	_STRUCTURAL_X WLK	Structural Measures	Structural Measures
OP-12	Able to receive lab results electronically			
OP-17	Able to track patients' lab, tests, and referrals electronically between visits			

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Survey of F	atients' Experiences (HCAHI	PS)		
HCAHPS	Patients who reported that their nurses "Always" communicated well Patients who reported that their doctors "Always" communicated well Patients who reported that they "Always" received help as soon as they wanted Patients who reported that their pain was "Always" well controlled Patients who reported that staff "Always" explained about medicines before giving it to them	dbo_vwHQI_HOSP _HCAHPS_MSR	HCAHPS Measures	HCAHPS Measures

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Survey of F	Patients' Experiences (HCAHI	PS)		
	Patients who reported that their room and bathroom were "Always" clean Patients who reported that the area around their room was "Always" quiet at night Patients at each hospital who reported that YES, they were given information about what to do during their recovery at home Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest) Patients who reported YES, they would definitely recommend the hospital			

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Acute Myo	cardial Infarction (AMI)			
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-5	Average number of minutes before outpatients with chest pain or possible heart attack got an ECG	dbo_vwHQI_HOS	Process of Care Measures - Heart	Process of Care Measures - Heart
OP-2	Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival	P_MSR_XWLK	Attack	Attack
OP-4	Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival			

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Acute Myo	cardial Infarction (AMI)			
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-2	Heart attack patients given aspirin at discharge			
AMI-10	Heart attack patients given a prescription for a statin at discharge			
OP-1	Median time to Fibrinolysis			

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Heart Failu	ıre (HF)			
HF-1	Heart failure patients given discharge Instructions			
HF-2	Heart failure patients given an evaluation of left ventricular systolic (LVS) function	dbo_vwHQI_HOSP _MSR_XWLK	Process of Care Measures - Heart	Process of Care Measures - Heart
HF-3	Heart failure patients given ACE inhibitor or ARB for left ventricular systolic dysfunction (LVSD)		Failure	Failure

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Pneumonia	(PN)			
PN-3b	Pneumonia patients whose initial emergency room blood culture was performed prior to the administration of the first hospital dose of antibiotics	dbo_vwHQI_HOSP _MSR_XWLK	Process of Care Measures - Pneumonia	Process of Care Measures - Pneumonia
PN-6	Pneumonia patients given the most appropriate initial antibiotic(s)			

Measure	Measure as Displayed on	Access Database	CSV – Revised	Data.Medicare.Gov
Identifier	Hospital Compare		database	
Surgical Ca	are Improvement Project (SC)	(P)		
OP-6	Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery			
SCIP-Inf- 1a	Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection			
SCIP-Inf- 3a	Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery)			
SCIP- VTE-2	Patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery			
OP-7	Outpatients having surgery who got the right kind of antibiotic	dbo_vwHQI_HOS P_MSR_XWLK	Process of Care Measures - SCIP	Process of Care Measures - SCIP
SCIP- Card-2	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			
SCIP-Inf- 2a	Surgery patients who were given the right kind of antibiotic to help prevent infection			
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 catheters were removed on the first or second day after surgery			

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov	
Surgical Ca	Surgical Care Improvement Project (SCIP)				
SCIP-Inf-	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 after certain types of surgeries				

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Emergency	v Department (ED) Throughpo	ut		
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	dbo_vwHQI_HOSP	Emergency Department	Emergency Department
OP-18b	Average time patients spent in the emergency department before being sent home	_ED	Throughput	Throughput
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.			

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov	
Emergency	Emergency Department (ED) Throughput				
OP-22	Percentage of patients who left the emergency department before being seen				
OP-23	Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival				

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Preventive Care				
IMM-2	Patients assessed and given influenza vaccination	dbo_vwHQI_HOSP	Torrespiration	Languagiantina
IMM-1 a	Patients assessed and given pneumonia vaccination	_IMM	Immunization	Immunization

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Children's	Asthma Care (CAC)			
CAC-1a	Children who received reliever medication while hospitalized for asthma			
CAC-2a	Children who received systemic corticosteroid medication (oral and iv medication that reduces inflammation and controls symptoms) while hospitalized for asthma	dbo_vwHQI_HOSP _MSR_XWLK	Process of Care Measures - Children	Process of Care Measures - Children
CAC-3	Children and their caregivers who received a home management plan of care document while hospitalized for asthma			

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Readmissio	ons and Deaths			
READM- 30-AMI MORT- 30-AMI READM- 30-HF MORT- 30-HF READM- 30-PN MORT- 30-PN READM- 30-PN READM- 30-HIP- KNEE READM- 30-HOSP- WIDE	Rate of readmission for heart attack patients Death rate for heart attack patients Rate of readmission for heart failure patients Death rate for heart failure patients Rate of readmission for pneumonia patients Death rate for pneumonia patients Rate of readmission for hip and knee replacement patients Rate of readmission after discharge from hospital (hospital-wide)	dbo_vwHQI_HOSP _MORTALITY_RE - ADM_XWLK	Outcome Of Care Measures	Outcome Of Care Measures

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Surgical Co	omplications			
PSI-90	Serious complications (This is a 'composite' or summary measure)	vwHQI_HOSP_AH	Agency for Healthcare	Agency for Healthcare Research
PSI-04	Deaths among patients with serious treatable complications after surgery	RQ	Research and Quality	and Quality
COMP- HIP- KNEE	Rate of complications for hip and knee replacement patients	dbo_vwHQI_HOSP _MORTALITY_RE ADM_XWLK	Outcome Of Care Measures	Outcome Of Care Measures
PSI-06	Collapsed lung due to medical treatment (Data will be not be posted on Hospital Compare but will be available on Data.Medicare.Gov)	vwHQI_HOSP_AH RQ	Agency for Healthcare Research and Quality	Agency for Healthcare Research and Quality

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Surgical Co	omplications			
PSI-12	Serious blood clots after surgery (Data will be not be posted on Hospital Compare but will be available on Data.Medicare.Gov)			
PSI-14	A wound that splits open after surgery on the abdomen or pelvis (Data will be not be posted on Hospital Compare but will be available on Data.Medicare.Gov)			
PSI-15	Accidental cuts and tears from medical treatment (Data will be not be posted on Hospital Compare but will be available on Data.Medicare.Gov)			

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Healthcare	-Associated Infections (HAI)			
HAI-1	Central line- associated bloodstream infection (CLABSI)			
HAI-2	Catheter- associated urinary tract infection (CAUTI)	vwHQI_HOSP_HAI	Healthcare_Associ	Healthcare
HAI-3	Surgical site infections from colon surgery (SSI: Colon)	wnQi_nosr_nAi	ated_Infections	Associated Infections
HAI-4	Surgical site infections from abdominal hysterectomy (SSI: Hysterectomy)			

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Hospital-Ad	equired Conditions (HAC)			
HAC-1	Objects accidentally left in the body after surgery	vwHQI_HOSP_HA	Hospital Acquired	Hospital Acquired
HAC-2	Air bubble in the bloodstream	С	Condition	Condition

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Hospital-A	cquired Conditions (HAC)			
HAC-3	Mismatched blood types			
HAC-4	Severe pressure sores (bed sores)			
HAC-5	Falls and injuries			
HAC-6	Blood infection from a catheter in a large vein			
HAC-7	Infection from a urinary catheter			
HAC-8	Signs of uncontrolled blood sugar			

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Percutaneo	ous Coronary Intervention (PC	CI) Readmission Meas	ure	
	American College of Cardiology Percutaneous Coronary Intervention (PCI) Readmission Measure		American_College _of_Cardiology_Pe rcutaneous_Corona ry_Intervention_PC I_Readmission_Me asure	American College of Cardiology Percutaneous Coronary Intervention (PCI) Readmission Measure

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Use of Med	lical Imaging			
OP-8	Outpatients with low back pain who had an MRI without trying recommended treatments first, such as physical therapy	dbo_vwHQI_HOSP	Outpatient Imaging Efficiency	Outpatient Imaging
OP-9	Outpatients who had a follow-up mammogram, ultrasound, or MRI of the breast within 45 days after a screening mammogram	_IMG_XWLK	Measures	Efficiency Measures

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Use of Med	lical Imaging			
OP-11	Outpatient CT scans of the chest that were "combination" (double) scans			
OP-10	Outpatient CT scans of the abdomen that were "combination" (double) scans			
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			

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Medicare Payment				
Medicare Spending (SPP)	Spending per hospital patient with Medicare	vwHQI_HOSP_SPP	Medicare Spending Per Patient	Medicare Spending Per Patient

Measure Identifier	Measure as Displayed on Hospital Compare	Access Database	CSV – Revised database	Data.Medicare.Gov
Medicare Volume				
Medicare Volume (MV)	Number of Medicare patients treated for selected procedures	dbo_vwHQI_HOSP _MPV_MSR	Medicare Volume Measures	Medicare Volume Measures

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)

11			
#	Question		
Q1	During this hospital stay how often did nurses treat you with courtesy and respect?		
Q2	During this hospital stay how often did nurses listen carefully to you?		
Q3	During this hospital stay how often did nurses explain things in a way you could understand?		
Q4	During this hospital stay, after you pressed the call button, how often did you get help as soon as you		
	wanted it?		
Q5	During this hospital stay, how often did doctors treat you with courtesy and respect?		
Q6	During this hospital stay, how often did doctors listen carefully to you?		
Q7	During this hospital stay, how often did doctors explain things in a way you could understand?		
Q8	During this hospital stay, how often were your room and bathroom kept clean?		
Q9	During this hospital stay, how often was the area around your room quiet at night?		
Q10	During this hospital stay, did you need help from nurses or other hospital staff in getting to the bathroom		
	or in using a bedpan?		
Q11	How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?		
Q12	During this hospital stay, did you need medicine for pain?		
Q13	During this hospital stay, how often was your pain well controlled?		
Q14	During this hospital stay, how often did the hospital staff do everything they could to help you with your		
	pain?		
Q15	During this hospital stay, were you given any medicine that you had not taken before?		
Q16	Before giving you any new medicine how often did hospital staff tell you what the medicine was for?		
Q17	Before giving you any new medicine how often did hospital staff describe possible side effects in a way		
	you could understand?		
Q18	After you left the hospital, did you go directly to your own home, to someone else's home, or to another		
	health facility?		
Q19	During this hospital stay, did doctors, nurses or other hospital staff talk with you about whether you would		
	have the help you needed when you left the hospital?		

#	Question	
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?	

${\bf Appendix} \; {\bf C-Footnote} \; {\bf Crosswalk}$

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:

#	Text	Definition
1	The number of cases/patients is too few to report.	 This footnote is applied when the amount of data for a measure: Does not meet the required minimum amount for public reporting. Is too small to reliably tell how well a hospital is performing, and/or To protect personal health information.
2	Data submitted were based on a sample of cases/patients.	This footnote indicates that a hospital chose to submit data for a random sample of its cases/patients while following specific rules for how to select the patients.
3	Results are based on a shorter time period than required.	This footnote indicates that the hospital's results were based on data from less than the maximum possible time period generally used to collect data for a measure. View the Hospital Compare Data Collection Periods for more information.
4	Data suppressed by CMS for one or more quarters.	The results for these measures were excluded for various reasons, such as data inaccuracies.
5	Results are not available for this reporting period.	This footnote is applied when the hospital does not have data to report.
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.	This footnote is applied when the number of completed surveys the hospital or its vendor provided to CMS is less than 100.
7	No cases met the criteria for this measure.	This footnote is applied when a hospital did not have any cases meet the inclusion criteria for a measure.
8	The lower limit of the confidence interval cannot be calculated if the number of observed infections equals zero.	
9	No data are available from the state/territory for this reporting period.	 This footnote is applied when: Too few hospitals in a state/territory had data available or No data was reported for this state/territory.

#	Text	Definition
10	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.
11	There were discrepancies in the data collection process.	This footnote is applied when there have been deviations from data collection protocols. CMS is working to correct this situation.
12	This measure does not apply to this hospital for this reporting period.	 This footnote is applied when: There were zero device days or procedures, The hospital does not have ICU locations, The hospital is a new member of the registry and didn't have an opportunity to submit any cases or The hospital does not report this voluntary measure
13	Results cannot be calculated for this reporting period.	 This footnote is applied when: The number of predicted infections is less than 1, or The number of observed MRSA or Clostridium difficile infections present on admission (community-onset prevalence) was above a predetermined cut-point.
14	The results for this state are combined with nearby states to protect confidentiality.	This footnote is applied when a state has fewer than 10 hospitals in order to protect confidentiality. Results are combined as follows: (1) the District of Columbia and Delaware are combined; (2) Alaska and Washington are combined; (3) North Dakota and South Dakota are combined; and (4) New Hampshire and Vermont are combined. Hospitals located in Maryland and U.S. territories are excluded from the measure calculation.