

VERSION HISTORY

SL NO.	Document Version	Revision Date	Revision Description
1	Version 1.0	04/8/2020	Initial Draft <ol style="list-style-type: none">1. Table of content2. Document Objective3. Source Data Description4. High Level Data Flow5. Integration Layer Schema6. Data Mart Schema
2	Version 1.1	4/23/2018	<ol style="list-style-type: none">1. Source Data Description<ul style="list-style-type: none">• Changed Data set – added 3 new datasets with description and removed 2 old data sets2. Improved High level Diagram3. Modified Integration Layer Schema4. Modified Data Mart Schema5. Modified mapping of data fields

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1. DOCUMENT OBJECTIVE:

The objective of the document is to provide information about the enterprise data warehouse design in the sense of data flow from source table to destination table in data warehouse and then into the data mart, and the mapping of each and every field throughout the staging area to data mart star schema.

2. SOURCE DATA DESCRIPTION:

- Each dataset was gathered from online CMS data repository available for free for the public use.
- The data was collected for three years- 2015,2016.

1. Legacy Medicare Provider Utilization and Payment Data: Hospice Providers

The Hospice Utilization and Payment Public Use File (Hospice PUF) provides information on services provided to Medicare beneficiaries by hospice providers. The dataset contains sites of service, information on utilization, payment, charges, primary diagnoses, and hospice beneficiary demographics organized by CMS Certification Number (6-digit provider identification number) and state.

Key Column: Provider ID

Link: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Provider-Charge-Data/Hospice2016>

2. Legacy Medicare Provider Utilization and Payment Data: Skilled Nursing Facilities

The Skilled Nursing Facility Utilization and Payment Public Use File (Skilled Nursing Facility PUF) provides information on services provided to Medicare beneficiaries residing in skilled nursing facilities. The Skilled Nursing Facility PUF contains information on utilization, payment (allowed amount, Medicare payment and standard payment), submitted charges, and beneficiary demographic and chronic condition indicators organized by CMS Certification Number (6-digit provider identification number), Resource Utilization Group (RUG), and state of service.

Key Column: Provider ID

Link: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Provider-Charge-Data/SNF>

3. Legacy Medicare Provider Utilization and Payment Data: Home Health Agencies

The Home Health Agency Utilization and Payment Public Use File (herein referred to as "Home Health Agency PUF") presents information on services provided to Medicare

beneficiaries by home health agencies. The Home Health Agency PUF contains information on utilization, payment (Medicare payment and standard payment), submitted charges, and demographic and chronic condition indicators organized by CMS Certification Number (6-digit provider identification number), Home Health Resource Group (HHRG), and state of service.

Link: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Provider-Charge-Data/HHA>

4. Medicare Provider Utilization and Payment Data: Inpatient

This dataset contains information on services and procedures provided to Medicare beneficiaries by hospital facilities.

Key Column: Provider ID

Link: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Provider-Charge-Data/Inpatient2015> (Detailed Data)

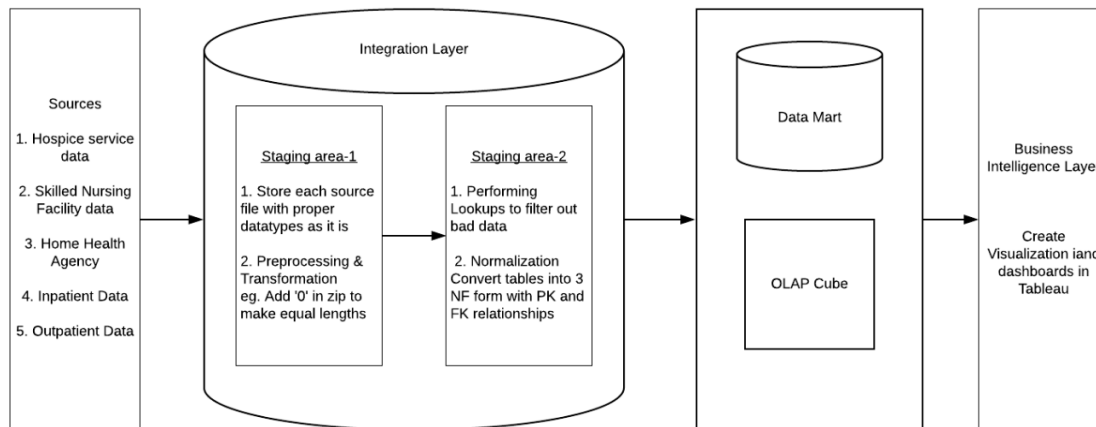
5. Medicare Provider Utilization and Payment Data: Outpatient

This dataset contains information on services and procedures provided to Medicare beneficiaries by hospital outpatient facilities.

Key Column: Provider ID

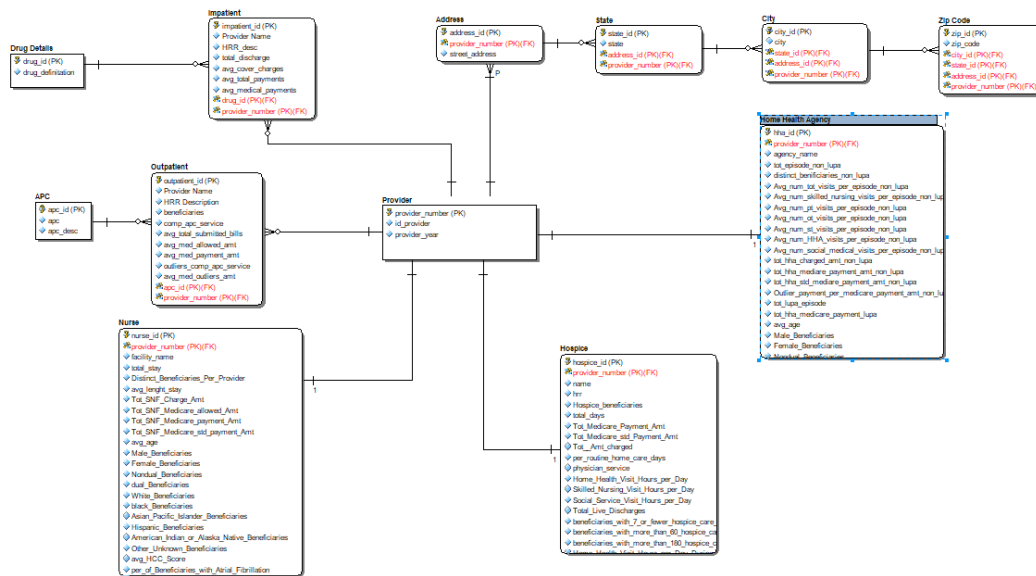
Link: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Provider-Charge-Data/Outpatient> (Detailed Data)

3. HIGH LEVEL DATA FLOW:(From Source files to Data Mart)



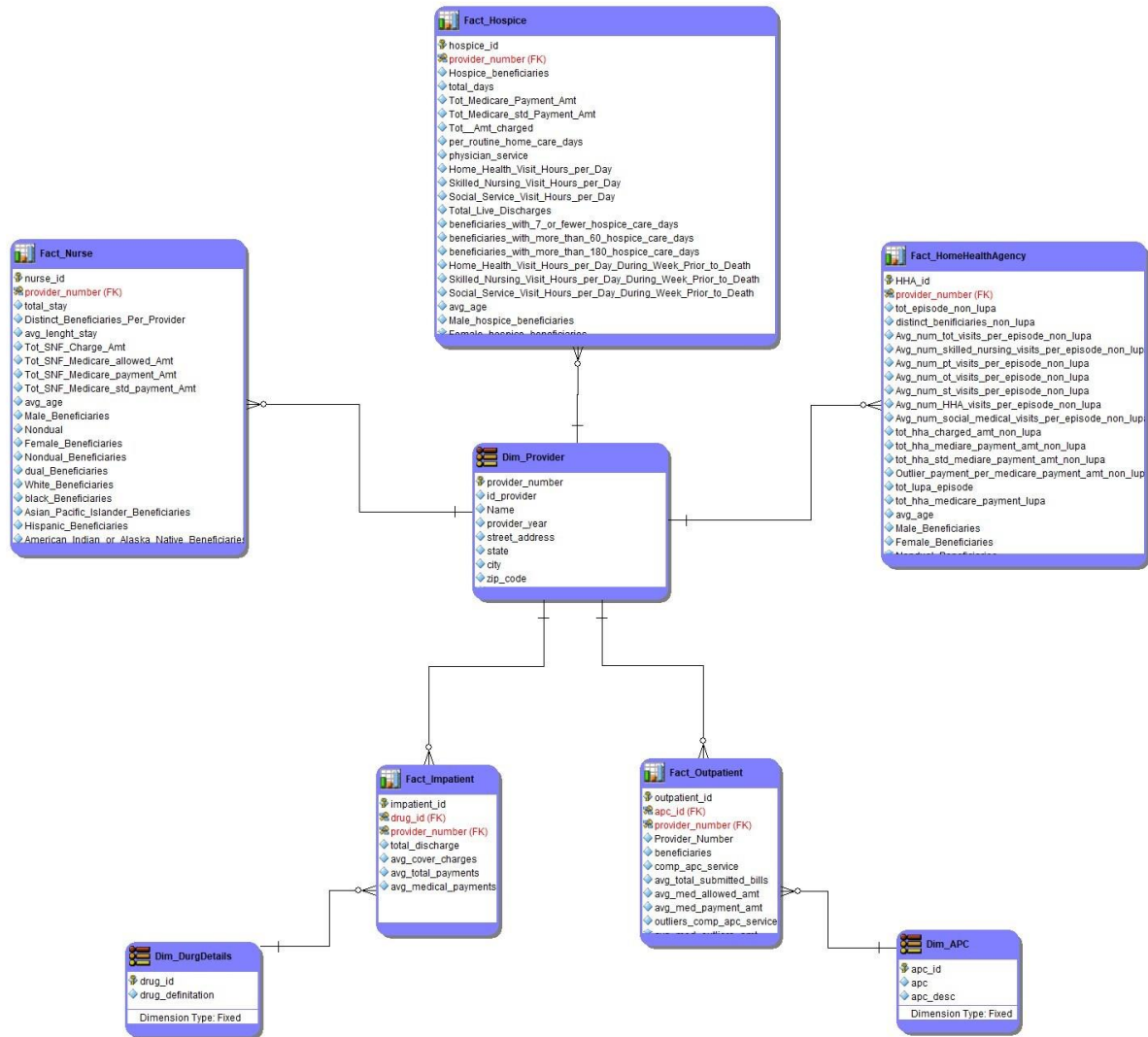
- The data from 5 source file is taken in the staging tables as it is. No transformation has been done on that.
- Then the data is transformed.
 - Zip code length is checked and if it is less than 5 the required processing is done to save it accurately.
 - Data with acceptable null values are removed.
 - Unique key with provider id and year is generated.
 - Table with unique addresses is stored.
- Then data is stored in 5 different destination table with year column indicating the year the record belongs to.
- Datamart with required facts and dimension is created that answers specific business needs.
- In business intelleginece layer, Tableau is connected with the data mart to create a visualizartion showcasing KPIs.

4. INTEGRATION LAYER SCHEMA (ERD):



- Data is stored first in the staging table from the source file.
- For fields with business importance, appropriate look up is performed to test the quality of the data.
- If each and every lookup checks out, the data is stored in the datawarehouse destination tables for their sources.
- In the destination table, data is stored with respective lookup key and whenever data retrieval is required, particular join is made to query the data.
- Storing data in such manner improves efficiency as it reduces working with the text data which takes longer time to process.

5. DATA MART SCHEMA (ERD):



- After data is stored in the Data warehouse, Data Mart for a particular business requirement is created.
- The objective of the data mart here is to analyze the performance of a provider in 4 different areas. Hence, we have 4 fact tables.
- The 4 facts share 3 common dimension. Provider name, location and year.
- There are other dimensions specific to one fact table which provides additional information about the provider.
- This data mart can be used further in business intelligence layer.

6. Mapping of dataset columns

Hospice Data Source

Sr. no	Columns	Description	DataSize(Bytes)
1	Provider ID	This is provider's Identification Number.	32
2	Name	Name of the provider	32
3	Street Address	street address with the unit number and street name	32
4	City	city of the provider - Full name	32
5	State	state of the provider- two letter short name	32
6	ZIP Code	4/5 digit zipcode of provider	32
7	HRR	The hospital referral region (HRR) of the hospice provider based on provider ZIP code.	32
8	Hospice beneficiaries	number of people who use the service	32
9	Total Days	Total count of hospice care days provided in the calendar year. Includes first and last day of care.	32

10	Total Medicare Payment Amount	Total amount that Medicare paid for hospice care. Hospice services do not have any cost-sharing requirements and the Medicare payment amount will equal the allowed amount.	32
11	Total Medicare Standard Payment Amount	Total amount that Medicare paid for hospice care adjusted for geographic differences in payment rates.	32
12	Total Charge Amount	Total charges that hospice providers submitted for hospice care.	32
13	Percent Routine Home Care Days	Percent of total number of hospice days that were routine home care (RHC) days. RHC days identified using Revenue Code 0651.	58
14	Physician Services	Total number of hospice care physician services provided. Physician services identified using Revenue Code 0657.	32

15	Home Health Visit Hours per Day	Average number of hours per day of home health aide hospice care provided. Home health visits identified using Revenue Codes 0570, 0571, 0572 and 0579.	32
16	Skilled Nursing Visit Hours per Day	Average number of hours per day of skilled nursing hospice care provided. Skilled nursing visits identified using Revenue Codes 0550, 0551, 0552 and 0559.	32
17	Social Service Visit Hours per Day	Average number of hours per day of social services hospice care provided. Social service visits identified using Revenue Codes 0560, 0561, 0562 and 0569.	32
18	Total Live Discharges	The percent of Medicare beneficiaries who died while receiving hospice care. This variable is available in the State Table. The denominator is the total number of Medicare decedents in the calendar year in the state.	32

19	Hospice beneficiaries with 7 or fewer hospice care days	Number of distinct Medicare beneficiaries with live discharges from hospice care. A hospice beneficiary was considered to have a live discharge if hospice beneficiary did not die in hospice care and was not receiving hospice care. Includes live discharges for any reason including revocation.	32
20	Hospice beneficiaries with more than 60 hospice care days	Number of distinct Medicare beneficiaries with 7 or fewer hospice care days. Excludes hospice beneficiaries whose hospice care continued from a previous calendar year or into the next calendar year.	32
21	Hospice beneficiaries with more than 180 hospice care days	Number of distinct Medicare beneficiaries with more than 60 hospice care days	32
22	Home Health Visit Hours per Day During Week Prior to Death	Number of distinct Medicare beneficiaries with more than 180 hospice care days.	32

23	Skilled Nursing Visit Hours per Day During Week Prior to Death	Average number of hours per day of home health aide hospice care provided during the seven days prior to death. Home health aide visits identified using Revenue Codes 0570, 0571, 0572 and 0579.	32
24	Social Service Visit Hours per Day During Week Prior to Death	Average number of hours per day of social services hospice care provided during the seven days prior to death. Social service visits identified using Revenue Codes 0560, 0561, 0562 and 0569.	32
25	Average Age	Average age of Medicare beneficiaries using hospice care.	32
26	Male hospice beneficiaries	Number of distinct male Medicare beneficiaries receiving at least one day of hospice care in the calendar year.	32

27	Female hospice beneficiaries	Number of distinct female Medicare beneficiaries receiving at least one day of hospice care in the calendar year.	32
28	White hospice beneficiaries	Number of distinct non-Hispanic white Medicare beneficiaries receiving at least one day of hospice care in the calendar year	32
29	Black hospice beneficiaries	Number of distinct black or African American Medicare beneficiaries receiving at least one day of hospice care in the calendar year.	32
30	Asian hospice beneficiaries	Number of distinct Asian/Pacific Islander Medicare beneficiaries receiving at least one day of hospice care in the calendar year.	32

31	Hispanic hospice beneficiaries	Number of distinct Hispanic Medicare beneficiaries receiving at least one day of hospice care in the calendar year	32
32	Other/unknown race hospice beneficiaries	Number of distinct Medicare beneficiaries of other race receiving at least one day of hospice care in the calendar year. This category also includes the count of American Indian/Alaska Native beneficiaries.	32
33	Medicare Advantage hospice beneficiaries	Number of distinct Medicare beneficiaries enrolled in Medicare Advantage for at least one month and receiving at least one day of hospice care in the calendar year	32
34	Medicaid Eligible hospice beneficiaries	Number of distinct Medicare beneficiaries eligible for Medicaid for at least one month and receiving at least one day of hospice care in the calendar year.	32

35	Hospice beneficiaries with a primary diagnosis of cancer	Number of distinct Medicare beneficiaries receiving hospice care for a primary diagnosis of cancer. Clinical Classifications Software single level diagnosis categories 11-17 were used to define cancer diagnoses. If a hospice beneficiary had more than one primary diagnosis the most frequent diagnosis in terms of hospice care days was used.	32
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36	Hospice beneficiaries with a primary diagnosis of dementia	<p>Number of distinct Medicare beneficiaries receiving hospice care for a primary diagnosis of dementia.</p> <p>Clinical Classifications Software single level diagnosis category 653 were used to define dementia diagnoses. If a hospice beneficiary had more than one primary diagnosis the most frequent diagnosis in terms of hospice care days was used</p>	32
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37	Hospice beneficiaries with a primary diagnosis of stroke	Number of distinct Medicare beneficiaries receiving hospice care for a primary diagnosis of circulatory/heart disease. Clinical Classifications Software single level diagnosis categories 96-108 and 114-121 were used to define circulatory/heart diagnoses. If a hospice beneficiary had more than one primary diagnosis the most frequent diagnosis in terms of hospice care days was used.	32
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38	Hospice beneficiaries with a primary diagnosis of circulatory/heart disease	Number of distinct Medicare beneficiaries receiving hospice care for a primary diagnosis of stroke. Clinical Classifications Software single level diagnosis categories 109-113 were used to define stroke diagnoses. If a hospice beneficiary had more than one primary diagnosis the most frequent diagnosis in terms of hospice care days was used.	32
39	Hospice beneficiaries with a primary diagnosis of respiratory disease		32

40	Hospice beneficiaries with other primary diagnoses	Number of distinct Medicare beneficiaries receiving hospice care for a primary diagnosis of respiratory disease. Clinical Classifications Software single level diagnosis categories 127-134 were used to define respiratory diagnoses. If a hospice beneficiary had more than one primary diagnosis the most frequent diagnosis in terms of hospice care days was used	32
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41	Site-of-service - Home hospice beneficiaries	Number of distinct Medicare beneficiaries receiving hospice care for a primary diagnosis other than cancer, dementia, circulatory/heart, stroke, or respiratory. If a hospice beneficiary had more than one primary diagnosis the most frequent diagnosis in terms of hospice care days was used.	32
42	Site-of-service - Assisted Living Facility hospice beneficiaries		32
43	Site-of-service - Long-term-care or non-skilled Nursing Facility hospice beneficiaries	Number of distinct Medicare beneficiaries receiving the majority of their hospice care days at home. HCPCS code Q5001 indicates care provided in hospice beneficiary's private residence (home).	32

44	Site-of-service - Skilled Nursing Facility hospice beneficiaries	Number of distinct Medicare beneficiaries receiving the majority of their hospice care days in an assisted living facility. HCPCS code Q5002 indicates care provided in an assisted living facility.	32
45	Site-of-service - Inpatient Hospital hospice beneficiaries	Number of distinct Medicare beneficiaries receiving the majority of their hospice care days in a long term care or nonskilled nursing facility. HCPCS code Q5003 indicates care provided in a long term care or non-skilled nursing facility.	32
46	Site-of-service - Inpatient Hospice hospice beneficiaries	Number of distinct Medicare beneficiaries receiving the majority of their hospice care days in an inpatient hospice facility. HCPCS code Q5006 indicates care provided in an inpatient hospice facility	32

47	Site-of-service - Other Facility hospice beneficiaries	Number of distinct Medicare beneficiaries receiving the majority of their hospice care days in a long term care hospital, psychiatric facility, home care in a hospice facility or unknown facility. HCPCS codes Q5007-Q5010 indicate care provided in other facilities.	32
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Staging

Sr.No	Column	Datatype
1	ProviderID	int
2	Name	varchar
3	StreetAddress	varchar
4	City	varchar
5	State	varchar
6	ZIPCode	int
7	HRR	varchar
8	Hospicebeneficiaries	int
9	TotalDays	int
10	TotalMedicarePaymentAmount	float
11	TotalMedicareStandardPaymentAmount	float
12	TotalChargeAmount	float
13	PercentRoutineHomeCareDays	int
14	PhysicianServices	int
15	HomeHealthVisitHoursperDay	int
16	SkilledNursingVisitHoursperDay	int
17	SocialServiceVisitHoursperDay	int
18	TotalLiveDischarges	float
19	Hospicebeneficiarieswith7orfewerhospicecaredays	int

20	Hospicebeneficiarieswithmorethan60hospicecaredays	int
21	Hospicebeneficiarieswithmorethan180hospicecaredays	int
22	HomeHealthVisitHoursperDayDuringWeekPriortoDeath	float
23	SkilledNursingVisitHoursperDayDuringWeekPriortoDeath	int
24	SocialServiceVisitHoursperDayDuringWeekPriortoDeath	int
25	AverageAge	float
26	Malehospicebeneficiaries	int
27	Femalehospicebeneficiaries	int
28	Whitehospicebeneficiaries	int
29	Blackhospicebeneficiaries	int
30	Asianhospicebeneficiaries	int
31	Hispanichospicebeneficiaries	int
32	Other/unknownracehospicebeneficiaries	int
33	MedicareAdvantagehospicebeneficiaries	int
34	MedicaidEligiblehospicebeneficiaries	int
35	Hospicebeneficiarieswithaprimariydiagnosisofcancer	int
36	Hospicebeneficiarieswithaprimariydiagnosisofdementia	int
37	Hospicebeneficiarieswithaprimariydiagnosisofstroke	int
38	Hospicebeneficiarieswithaprimariydiagnosisofcirculatory/hear tdisease	int
39	Hospicebeneficiarieswithaprimariydiagnosisofrespiratorydise ase	int
40	Hospicebeneficiarieswithotherprimariydiagnoses	int
41	Site-of-service-Homehospicebeneficiaries	int
42	Site-of-service-AssistedLivingFacilityhospicebeneficiaries	int
43	Site-of-service-Long-term-careornon- skilledNursingFacilityhospicebeneficiaries	int

44	Site-of-service-SkilledNursingFacilityhospicebeneficiaries	int
45	Site-of-service-InpatientHospitalhospicebeneficiaries	int
46	Site-of-service-InpatientHospicehospicebeneficiaries	int
47	Site-of-service-OtherFacilityhospicebeneficiaries	int

Mapping of data fields

Sr. No	Source Table	Sourcefield	Destination Table	Destination Field	Logic
1			Hospice	hospice_id	identity autoincrement starts with 1
2	stg_hospice	ProviderID	Hospice	provider_number	FK from Provider table
3	stg_hospice	Name	Hospice	name	copied as it is
4	stg_hospice	StreetAddress	Hospice	Address	saved in address table with address id
5	stg_hospice	City	City	city	saved in city table with city id
6	stg_hospice	State	State	state	saved in state table with state id
7	stg_hospice	ZIPCode	Hospice	Zipcode	saved in zip code table with zip code id
8	stg_hospice	HRR	Hospice	hrr	saved in hrr table with hrr id
9	stg_hospice	Hospicebeneficiaries	Hospice	Hospice_beneficiaries	copied as it is
10	stg_hospice	TotalDays	Hospice	total_days	copied as it is

11	stg_hospice	TotalMedicarePaymentAmount	Hospice	Tot_Medicare_Payment_Amt	copied as it is
12	stg_hospice	TotalMedicareStandardPaymentAmount	Hospice	Tot_Medicare_std_Payment_Amt	copied as it is
13	stg_hospice	TotalChargeAmount	Hospice	Tot__Amt_charged	copied as it is
14	stg_hospice	PercentRoutineHomeCareDays	Hospice	per_routine_home_care_days	copied as it is
15	stg_hospice	PhysicianServices	Hospice	physician_service	copied as it is
16	stg_hospice	HomeHealthVisitHoursperDay	Hospice	Home_Health_Visit_Hours_per_Day	copied as it is
17	stg_hospice	SkilledNursingVisitHoursperDay	Hospice	Skilled_Nursing_Visit_Hours_per_Day	copied as it is
18	stg_hospice	SocialServiceVisitHoursperDay	Hospice	Social_Service_Visit_Hours_per_Day	copied as it is
19	stg_hospice	TotalLiveDischarges	Hospice	Total_Live_Discharges	copied as it is
20	stg_hospice	Hospicebeneficiarieswith7orfewerhospicecare days	Hospice	beneficiaries_with_7_or_fewer_hospice_care_days	copied as it is
21	stg_hospice	Hospicebeneficiarieswithmorethan60hospicecare days	Hospice	beneficiaries_with_more_than_60_hospice_care_days	copied as it is

22	stg_hospice	Hospicebeneficiarieswithmorethan180hospicecaredays	Hospice	beneficiaries_with_more_than_180_hospice_care_days	copied as it is
23	stg_hospice	HomeHealthVisitHoursperDayDuringWeekPriorToDeath	Hospice	Home_Health_Visit_Hours_per_Day_During_Week_Prior_to_Death	copied as it is
24	stg_hospice	SkilledNursingVisitHoursperDayDuringWeekPriorToDeath	Hospice	Skilled_Nursing_Visit_Hours_per_Day_During_Week_Prior_to_Death	copied as it is
25	stg_hospice	SocialServiceVisitHoursperDayDuringWeekPriorToDeath	Hospice	Social_Service_Visit_Hours_per_Day_During_Week_Prior_to_Death	copied as it is
26	stg_hospice	AverageAge	Hospice	avg_age	copied as it is
27	stg_hospice	Malehospicebeneficiaries	Hospice	Male_hospice_beneficiaries	copied as it is
28	stg_hospice	Femalehospicebeneficiaries	Hospice	Female_hospice_beneficiaries	copied as it is
29	stg_hospice	Whitehospicebeneficiaries	Hospice	White_hospice_beneficiaries	copied as it is
30	stg_hospice	Blackhospicebeneficiaries	Hospice	Black_hospice_beneficiaries	copied as it is

31	stg_hospice	Asianhospicebeneficiaries	Hospice	Asian_hospice_beneficiaries	copied as it is
32	stg_hospice	Hispanichospicebeneficiaries	Hospice	Hispanic_hospice_beneficiaries	copied as it is
33	stg_hospice	Other/unknownracehospicebeneficiaries	Hospice	Other_unknown_race_hospice_beneficiaries	copied as it is
34	stg_hospice	MedicareAdvantagehospicebeneficiaries	Hospice	Medicare_Advantage_hospice_beneficiaries	copied as it is
35	stg_hospice	MedicaidEligiblehospicebeneficiaries	Hospice	Medicaid_Eligible_hospice_beneficiaries	copied as it is
36	stg_hospice	Hospicebeneficiarieswithprimarydiagnosisofcancer	Hospice	Hospice_beneficiaries_with_a_primary_diagnosis_of_cancer	copied as it is
37	stg_hospice	Hospicebeneficiarieswithprimarydiagnosisofdementia	Hospice	Hospice_beneficiaries_with_a_primary_diagnosis_of_dementia	copied as it is
38	stg_hospice	Hospicebeneficiarieswithprimarydiagnosisofstroke	Hospice	Hospice_beneficiaries_with_a_primary_diagnosis_of_stroke	copied as it is

39	stg_hospice	Hospicebeneficiarieswithprimarydiagnosisofcirculatory/heartdisease	Hospice	Hospice_beneficiaries_with_a_primary_diagnosis_of_circulatory_heart_disease	copied as it is
40	stg_hospice	Hospicebeneficiarieswithprimarydiagnosisofrespiratorydisease	Hospice	Hospice_beneficiaries_with_a_primary_diagnosis_of_respiratory_disease	copied as it is
41	stg_hospice	Hospicebeneficiarieswithotherprimarydiagnoses	Hospice	Hospicebeneficiaries_with_other_primary_diagnoses	copied as it is
42	stg_hospice	Site-of-service-Homehospicebeneficiaries	Hospice	SOS_Home_hospice_beneficiaries	copied as it is
43	stg_hospice	Site-of-service-AssistedLivingFacilityhospicebeneficiaries	Hospice	SOS_Assisted_Living_Facility_hospice_beneficiaries	copied as it is
44	stg_hospice	Site-of-service-Long-term-careornon-skilledNursingFacilityhospicebeneficiaries	Hospice	SOS_Long-term-care_or_non-skilled_Nursing_Facility_hospice_beneficiaries	copied as it is

45	stg_hospice	Site-of-service-SkilledNursingFacilityhospicebeneficiaries	Hospice	SOS_Skilled_Nursing_Facility_hospice_beneficiaries	copied as it is
46	stg_hospice	Site-of-service-InpatientHospitalhospicebeneficiaries	Hospice	SOS_Inpatient_Hospital_hospice_beneficiaries	copied as it is
47	stg_hospice	Site-of-service-InpatientHospicehospicebeneficiaries	Hospice	SOS_Inpatient_Hospice_hospice_beneficiaries	copied as it is
48	stg_hospice	Site-of-service-OtherFacilityhospicebeneficiaries	Hospice	SOS_Other_Facility_hospice_beneficiaries	copied as it is

Nursing and Facilities

Sr. no	Columns	Description	DataSize(Bytes)
1	Provider ID	This is provider's Identification Number.	32
2	Facility Name	Name of the provider	32
3	Street Address	street address with the unit number and street name	58
4	City	city of the provider - Full name	32
5	State	state of the provider- two letter short name	32
6	Zip Code	4/5 digit zipcode of provider	32
7	Total Stays	Total number of skilled nursing facility stays.	32

8	Distinct Beneficiaries Per Provider	Number of distinct Medicare beneficiaries with at least one skilled nursing facility day per provider. A beneficiary will only be counted once per provider, but may be double-counted across providers.	32
9	Average Length of Stay (Days)	Average length of stay, in days, for all Medicare beneficiaries with at least one stay in the skilled nursing facility in the year.	32
10	Total SNF Charge Amount	Total of the charges that the skilled nursing facility submitted for all Medicare stays in the year.	32
11	Total SNF Medicare Allowed Amount	Total Medicare allowed amount for all Medicare stays in the year. This figure is the sum of the amount Medicare pays, the deductible and coinsurance amounts that the beneficiary is responsible for paying, and any amounts that a third party is responsible for paying.	32
12	Total SNF Medicare Payment Amount	Total amount that Medicare paid for all Medicare stays in the year after deductible and coinsurance amounts have been deducted.	32
13	Total SNF Medicare Standard Payment Amount	Total amount that Medicare paid for all Medicare stays in the year after deductible and coinsurance amounts have been deducted, adjusted for geographic differences in payment rates.	32

14	Average Age	Average age of beneficiaries. Beneficiary age is calculated at the end of the calendar year or at the time of death.	32
15	Male Beneficiaries	Number of male beneficiaries.	32
16	Female Beneficiaries	Number of female beneficiaries.	32
17	Nondual Beneficiaries	Number of Medicare beneficiaries qualified to receive Medicare only benefits. Beneficiaries are classified as Medicare only entitlement if they received zero months of any Medicaid benefits (full or partial) in the given calendar year.	32
18	Dual Beneficiaries	Number of Medicare beneficiaries qualified to receive Medicare and Medicaid benefits. Beneficiaries are classified as Medicare and Medicaid entitlement if in any month in the given calendar year they were receiving full or partial Medicaid benefits.	32
19	White Beneficiaries	Number of non-Hispanic white beneficiaries.	32
20	Black Beneficiaries	Number of non-Hispanic black or African American beneficiaries.	32
21	Asian Pacific Islander Beneficiaries	Number of Asian Pacific Islander beneficiaries.	32
22	Hispanic Beneficiaries	Number of Hispanic beneficiaries.	32
23	American Indian or Alaska Native Beneficiaries	Number of American Indian or Alaska Native beneficiaries.	32
24	Other/ Unknown Beneficiaries	Number of beneficiaries with race not elsewhere classified.	32

25	Average HCC Score	Average Hierarchical Condition Category (HCC) risk score of beneficiaries. Please refer to the “Additional Information” section of the Methodology document for more details on HCC risk scores.	32
26	Percent of Beneficiaries with Atrial Fibrillation	Percent of beneficiaries meeting the CCW chronic condition algorithm for atrial fibrillation.	32
27	Percent of Beneficiaries with Alzheimer's	Percent of beneficiaries meeting the CCW chronic condition algorithm for Alzheimer’s, related disorders, or dementia.	
28	Percent of Beneficiaries with Asthma	Percent of beneficiaries meeting the CCW chronic condition algorithm for Asthma.	
29	Percent of Beneficiaries with Cancer	Percent of beneficiaries meeting the CCW chronic condition algorithms for cancer. Includes breast cancer, colorectal cancer, lung cancer and prostate cancer.	58
30	Percent of Beneficiaries with CHF	Percent of beneficiaries meeting the CCW chronic condition algorithm for heart failure.	56
31	Percent of Beneficiaries with Chronic Kidney Disease	Percent of beneficiaries meeting the CCW chronic condition algorithm for chronic kidney disease.	32
32	Percent of Beneficiaries with COPD	Percent of beneficiaries meeting the CCW chronic condition algorithm for chronic obstructive pulmonary disease.	32

33	Percent of Beneficiaries with Depression	Percent of beneficiaries meeting the CCW chronic condition algorithm for depression.	32
34	Percent of Beneficiaries with Diabetes	Percent of beneficiaries meeting the CCW chronic condition algorithm for diabetes.	32
35	Percent of Beneficiaries with Hyperlipidemia	Percent of beneficiaries meeting the CCW chronic condition algorithm for hyperlipidemia.	32
36	Percent of Beneficiaries with Hypertension	Percent of beneficiaries meeting the CCW chronic condition algorithm for hypertension.	32
37	Percent of Beneficiaries with IHD	Percent of beneficiaries meeting the CCW chronic condition algorithm for ischemic heart disease.	32
38	Percent of Beneficiaries with Osteoporosis	Percent of beneficiaries meeting the CCW chronic condition algorithm for osteoporosis.	32
39	Percent of Beneficiaries with RA/OA	Percent of beneficiaries meeting the CCW chronic condition algorithm for rheumatoid arthritis/osteoarthritis.	32
40	Percent of Beneficiaries with Schizophrenia	Percent of beneficiaries meeting the CCW chronic condition algorithm for schizophrenia and other psychotic disorders.	32
41	Percent of Beneficiaries with Stroke	Percent of beneficiaries meeting the CCW chronic condition algorithm for stroke.	32

Staging

Sr.No	Column	Datatype
1	ProviderID	int
2	FacilityName	varchar
3	StreetAddress	varchar
4	City	varchar
5	State	varchar
6	ZipCode	int
7	TotalStays	int
8	DistinctBeneficiariesPerProvider	int
9	AverageLengthofStay(Days)	int
10	TotalSNFChargeAmount	float
11	TotalSNFMedicareAllowedAmount	float
12	TotalSNFMedicarePaymentAmount	float
13	TotalSNFMedicareStandardPaymentAmount	float
14	AverageAge	float
15	MaleBeneficiaries	int
16	FemaleBeneficiaries	int
17	NondualBeneficiaries	int
18	DualBeneficiaries	int
19	WhiteBeneficiaries	int
20	BlackBeneficiaries	int
21	AsianPacificIslanderBeneficiaries	int
22	HispanicBeneficiaries	int
23	AmericanIndianorAlaskaNativeBeneficiaries	int
24	Other/UnknownBeneficiaries	int
25	AverageHCCScore	float
26	PercentofBeneficiarieswithAtrialFibrillation	float
27	PercentofBeneficiarieswithAlzheimer's	float
28	PercentofBeneficiarieswithAsthma	float
29	PercentofBeneficiarieswithCancer	float
30	PercentofBeneficiarieswithCHF	float
31	PercentofBeneficiarieswithChronicKidneyDisease	float
32	PercentofBeneficiarieswithCOPD	float
33	PercentofBeneficiarieswithDepression	float
34	PercentofBeneficiarieswithDiabetes	float
35	PercentofBeneficiarieswithHyperlipidemia	float
36	PercentofBeneficiarieswithHypertension	float
37	PercentofBeneficiarieswithIHD	float
38	PercentofBeneficiarieswithOsteoporosis	float

39	PercentofBeneficiarieswithRA/OA	float
40	PercentofBeneficiarieswithSchizophrenia	float
41	PercentofBeneficiarieswithStroke	float

Mapping of Data fields

Sr. No	Source Table	Source field	Destination Table	Destination Field	Logic
1			Nurse	nurse_id	identity autoincrement starts with 1
2	stg_nurse	ProviderID	Nurse	provider_number	FK from Provider table
3	stg_nurse	FacilityName	Nurse	facility_name	copied as it is
4	stg_nurse	StreetAddress	Nurse	Address	saved in address table with address id
5	stg_nurse	City	Nurse	city	saved in city table with city id
6	stg_nurse	State	Nurse	state	saved in state table with state id
7	stg_nurse	ZipCode	Nurse	Zipcode	saved in zip code table

					with zip code id
8	stg_ nurs e	TotalStays	Nurse	total_stay	copied as it is
9	stg_ nurs e	DistinctBeneficiariesPerPr ovider	Nurse	Distinct_Beneficiaries_Per_P rovider	copied as it is
10	stg_ nurs e	AverageLengthofStay(Days)	Nurse	avg_lenght_stay	copied as it is
11	stg_ nurs e	TotalSNFChargeAmount	Nurse	Tot_SNF_Charge_Amt	copied as it is
12	stg_ nurs e	TotalSNFMedicareAllowed Amount	Nurse	Tot_SNF_Medicare_allowed _Amt	copied as it is
13	stg_ nurs e	TotalSNFMedicarePaymen tAmount	Nurse	Tot_SNF_Medicare_paymen t_Amt	copied as it is
14	stg_ nurs e	TotalSNFMedicareStandar dPaymentAmount	Nurse	Tot_SNF_Medicare_std_pay ment_Amt	copied as it is
15	stg_ nurs e	AverageAge	Nurse	avg_age	copied as it is
16	stg_ nurs e	MaleBeneficiaries	Nurse	Male_Beneficiaries	copied as it is
17	stg_ nurs e	FemaleBeneficiaries	Nurse	Female_Beneficiaries	copied as it is
18	stg_ nurs e	NondualBeneficiaries	Nurse	Nondual_Beneficiaries	copied as it is
19	stg_ nurs e	DualBeneficiaries	Nurse	dual_Beneficiaries	copied as it is

20	stg_nurse	WhiteBeneficiaries	Nurse	White_Beneficiaries	copied as it is
21	stg_nurse	BlackBeneficiaries	Nurse	black_Beneficiaries	copied as it is
22	stg_nurse	AsianPacificIslanderBeneficiaries	Nurse	Asian_Pacific_Islander_Beneficiaries	copied as it is
23	stg_nurse	HispanicBeneficiaries	Nurse	Hispanic_Beneficiaries	copied as it is
24	stg_nurse	AmericanIndianorAlaskaNativeBeneficiaries	Nurse	American_Indian_or_Alaska_Native_Beneficiaries	copied as it is
25	stg_nurse	Other/UnknownBeneficiaries	Nurse	Other_Unknown_Beneficiaries	copied as it is
26	stg_nurse	AverageHCCScore	Nurse	avg_HCC_Score	copied as it is
27	stg_nurse	PercentofBeneficiarieswithAtrialFibrillation	Nurse	per_of_Beneficiaries_with_Atrial_Fibrillation	copied as it is
28	stg_nurse	PercentofBeneficiarieswithAlzheimer's	Nurse	[per_of_Beneficiaries_with_Alzheimer's]	copied as it is
29	stg_nurse	PercentofBeneficiarieswithAsthma	Nurse	per_of_Beneficiaries_with_Asthma	copied as it is
30	stg_nurse	PercentofBeneficiarieswithCancer	Nurse	per_of_Beneficiaries_with_Cancer	copied as it is
31	stg_nurse	PercentofBeneficiarieswithCHF	Nurse	per_of_Beneficiaries_with_CHF	copied as it is
32	stg_nurse	PercentofBeneficiarieswithChronicKidneyDisease	Nurse	per_of_Beneficiaries_with_Chronic_Kidney_Disease	copied as it is

33	stg_nurse	PercentofBeneficiarieswith COPD	Nurse	per_of_Beneficiaries_with_Depression	copied as it is
34	stg_nurse	PercentofBeneficiarieswith Depression	Nurse	per_of_Beneficiaries_with_Depression	copied as it is
35	stg_nurse	PercentofBeneficiarieswith Diabetes	Nurse	per_of_Beneficiaries_with_Diabetes	copied as it is
36	stg_nurse	PercentofBeneficiarieswith Hyperlipidemia	Nurse	per_of_Beneficiaries_with_Hyperlipidemia	copied as it is
37	stg_nurse	PercentofBeneficiarieswith Hypertension	Nurse	per_of_Beneficiaries_with_Hypertension	copied as it is
38	stg_nurse	PercentofBeneficiarieswith IHD	Nurse	per_of_Beneficiaries_with_IHD	copied as it is
39	stg_nurse	PercentofBeneficiarieswith Osteoporosis	Nurse	per_of_Beneficiaries_with_Osteoporosis	copied as it is
40	stg_nurse	PercentofBeneficiarieswith RA/OA	Nurse	per_of_Beneficiaries_with_RA_OA	copied as it is
41	stg_nurse	PercentofBeneficiarieswith Schizophrenia	Nurse	per_of_Beneficiaries_with_Schizophrenia	copied as it is
42	stg_nurse	PercentofBeneficiarieswith Stroke	Nurse	per_of_Beneficiaries_with_Stroke	copied as it is

**Home Health Agency
Source**

Sr. no	Columns	Description	DataSize(Bytes)
1	Provider ID	This is provider's Identification Number.	32
2	Agency Name	Name of the provider	32
3	Street Address	street address with the unit number and street name	32
4	City	city of the provider - Full name	32

5	State	state of the provider- two letter short name	32
6	Zip Code	4/5 digit zipcode of provider	32

7	Total Episodes (non-LUPA)	Total count of non-LUPA episodes provided by a specific home health agency or in a unique HHRG category in the calendar year.	32
8	Distinct Beneficiaries (non-LUPA)	Number of distinct Medicare beneficiaries receiving at least one non-LUPA home health episode in the calendar year. Beneficiaries may receive multiple home health episodes per year but are only counted once in this field.	32

9	Average Number of Total Visits Per Episode (non-LUPA)	Average number of total visits provided by the HHA during a non-LUPA episode.	32
10	Average Number of Skilled Nursing Visits Per Episode (non-LUPA)	Average number of skilled nursing visits provided by the HHA during a non-LUPA episode.	32
11	Average Number of PT Visits Per Episode (non-LUPA)	Average number of physical therapy visits provided by the HHA during a non-LUPA episode.	32

12	Average Number of OT Visits Per Episode (non-LUPA)	Average number of occupational therapy visits provided by the HHA during a non-LUPA episode.	32
13	Average Number of ST Visits Per Episode (non-LUPA)	Average number of speech therapy visits provided by the HHA during a non-LUPA episode.	32
14	Average Number of Home Health Aide Visits Per Episode (non-LUPA)	Average number of home health aide visits provided by the HHA during a non-LUPA episode.	32

15	Average Number of Medical-Social Visits Per Episode (non-LUPA)	Average number of medical-social visits provided by the HHA during a non-LUPA episode.	32
16	Total HHA Charge Amount (non-LUPA)	Total charges that the home health agency submitted for non-LUPA episodes.	32
17	Total HHA Medicare Payment Amount (non-LUPA)	Total amount that Medicare paid for non-LUPA episodes. Home health services do not have any cost-sharing requirements and the Medicare payment amount will equal the allowed amount.	32

18	Total HHA Medicare Standard Payment Amount (non-LUPA)	Total amount that Medicare paid for non-LUPA episodes adjusted for geographic differences in payment rates.	32
19	Outlier Payments as a Percent of Medicare Payment Amount (non-LUPA)	The percent of total Medicare payments for non-LUPA episodes paid to an HHA for outlier episodes.	32
20	Total LUPA Episodes	Total count of low utilization payment amount episodes provided by a specific HHA in the calendar year.	32

21	Total HHA Medicare Payment Amount for LUPAs	Total amount that Medicare paid for LUPA episodes provided by a specific HHA in the calendar year.	32
22	Average Age	Average age of beneficiaries. Beneficiary age is calculated at the end of the calendar year or at the time of death.	32
23	Male Beneficiaries	Number of male beneficiaries.	32
24	Female Beneficiaries	Number of female beneficiaries.	32

25	Nondual Beneficiaries	Number of Medicare beneficiaries qualified to receive Medicare only benefits. Beneficiaries are classified as Medicare only entitlement if they received zero months of any Medicaid benefits (full or partial) in the given calendar year.	32
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26	Dual Beneficiaries	Number of Medicare beneficiaries qualified to receive Medicare and Medicaid benefits. Beneficiaries are classified as Medicare and Medicaid entitlement if in any month in the given calendar year they were receiving full or partial Medicaid benefits.	32
27	White Beneficiaries	Number of non-Hispanic white beneficiaries.	32
28	Black Beneficiaries	Number of non-Hispanic black or African American beneficiaries.	32

29	Asian Pacific Islander Beneficiaries	Number of Asian Pacific Islander beneficiaries.	32
30	Hispanic Beneficiaries	Number of Hispanic beneficiaries.	32
31	American Indian or Alaska Native Beneficiaries	Number of American Indian or Alaska Native beneficiaries.	32
32	Other/ Unknown Beneficiaries	Number of beneficiaries with race not elsewhere classified.	32

33	Average HCC Score	Average Hierarchical Condition Category (HCC) risk score of beneficiaries. Please refer to the “Additional Information” section of the Methodology document for more details on HCC risk scores.	32
34	Percent of Beneficiaries with Atrial Fibrillation	Percent of beneficiaries meeting the CCW chronic condition algorithm for atrial fibrillation.	32

35	Percent of Beneficiaries with Alzheimer's	Percent of beneficiaries meeting the CCW chronic condition algorithm for Alzheimer's, related disorders, or dementia.	32
36	Percent of Beneficiaries with Asthma	Percent of beneficiaries meeting the CCW chronic condition algorithm for Asthma.	32

37	Percent of Beneficiaries with Cancer	Percent of beneficiaries meeting the CCW chronic condition algorithms for cancer. Includes breast cancer, colorectal cancer, lung cancer and prostate cancer.	58
38	Percent of Beneficiaries with CHF	Percent of beneficiaries meeting the CCW chronic condition algorithm for heart failure.	58
39	Percent of Beneficiaries with Chronic Kidney Disease	Percent of beneficiaries meeting the CCW chronic condition algorithm for chronic kidney disease.	58

40	Percent of Beneficiaries with COPD	Percent of beneficiaries meeting the CCW chronic condition algorithm for chronic obstructive pulmonary disease.	58
41	Percent of Beneficiaries with Depression	Percent of beneficiaries meeting the CCW chronic condition algorithm for depression.	58
42	Percent of Beneficiaries with Diabetes	Percent of beneficiaries meeting the CCW chronic condition algorithm for diabetes.	58

43	Percent of Beneficiaries with Hyperlipidemia	Percent of beneficiaries meeting the CCW chronic condition algorithm for hyperlipidemia.	58
44	Percent of Beneficiaries with Hypertension	Percent of beneficiaries meeting the CCW chronic condition algorithm for hypertension.	58
45	Percent of Beneficiaries with IHD	Percent of beneficiaries meeting the CCW chronic condition algorithm for ischemic heart disease.	58

46	Percent of Beneficiaries with Osteoporosis	Percent of beneficiaries meeting the CCW chronic condition algorithm for osteoporosis.	58
47	Percent of Beneficiaries with RA/OA	Percent of beneficiaries meeting the CCW chronic condition algorithm for rheumatoid arthritis/osteoarthritis.	58
48	Percent of Beneficiaries with Schizophrenia	Percent of beneficiaries meeting the CCW chronic condition algorithm for schizophrenia and other psychotic disorders.	58
49	Percent of Beneficiaries with Stroke	Percent of beneficiaries meeting the CCW chronic condition algorithm for stroke.	58

Staging

Sr.No	Column	Datatype
1	ProviderID	int
2	AgencyName	varchar
3	StreetAddress	varchar
4	City	varchar
5	State	varchar
6	ZipCode	int
7	TotalEpisodes(non-LUPA)	float
8	DistinctBeneficiaries(non-LUPA)	int
9	AverageNumberofTotalVisitsPerEpisode(non-LUPA)	float
10	AverageNumberofSkilledNursingVisitsPerEpisode(non-LUPA)	float
11	AverageNumberofPTVisitsPerEpisode(non-LUPA)	float
12	AverageNumberofOTVisitsPerEpisode(non-LUPA)	float
13	AverageNumberofSTVisitsPerEpisode(non-LUPA)	float
14	AverageNumberofHomeHealthAideVisitsPerEpisode(non-LUPA)	float
15	AverageNumberofMedical-SocialVisitsPerEpisode(non-LUPA)	float
16	TotalHHACHargeAmount(non-LUPA)	float
17	TotalHHAMedicarePaymentAmount(non-LUPA)	float
18	TotalHHAMedicareStandardPaymentAmount(non-LUPA)	float
19	OutlierPaymentsasaPercentofMedicarePaymentAmount(non-LUPA)	float
20	TotalLUPAEpisodes	float

21	TotalHHAMedicarePaymentAmountforLUPAs	float
22	AverageAge	float
23	MaleBeneficiaries	int
24	FemaleBeneficiaries	int
25	NondualBeneficiaries	int
26	DualBeneficiaries	int
27	WhiteBeneficiaries	int
28	BlackBeneficiaries	int
29	AsianPacificIslanderBeneficiaries	int
30	HispanicBeneficiaries	int
31	AmericanIndianorAlaskaNativeBeneficiaries	int
32	Other/UnknownBeneficiaries	int
33	AverageHCCScore	float
34	PercentofBeneficiarieswithAtrialFibrillation	float
35	PercentofBeneficiarieswithAlzheimer's	float
36	PercentofBeneficiarieswithAsthma	float
37	PercentofBeneficiarieswithCancer	float
38	PercentofBeneficiarieswithCHF	float
39	PercentofBeneficiarieswithChronicKidneyDisease	float
40	PercentofBeneficiarieswithCOPD	float
41	PercentofBeneficiarieswithDepression	float
42	PercentofBeneficiarieswithDiabetes	
43	PercentofBeneficiarieswithHyperlipidemia	float
44	PercentofBeneficiarieswithHypertension	float
45	PercentofBeneficiarieswithIHD	float
46	PercentofBeneficiarieswithOsteoporosis	float

47	PercentofBeneficiarieswithRA/OA	float
48	PercentofBeneficiarieswithSchizophrenia	float
49	PercentofBeneficiarieswithStroke	float

Mapping of Data Fields

Sr. N o	Source Table	Source field	Destination Table	Destination Field	Logic
1			Home Health Agency	hha_id	identity autoincrement starts with 1
2	stg_hha	ProviderID	Home Health Agency	provider_number	FK from Provider table
3	stg_hha	AgencyName	Home Health Agency	agency_name	copied as it is
4	stg_hha	StreetAddress	Home Health Agency	Address	saved in address table with address id
5	stg_hha	City	Home Health Agency	city	saved in city table with city id
6	stg_hha	State	Home Health Agency	state	saved in state table with state id
7	stg_hha	ZipCode	Home Health Agency	Zipcode	saved in zip code table with zip code id
8	stg_hha	TotalEpisodes(non-LUPA)	Home Health Agency	tot_episode_non_lupa	copied as it is
9	stg_hha	DistinctBeneficiaries(non-LUPA)	Home Health Agency	distinct_benificiarie_s_non_lupa	copied as it is
10	stg_hha	AverageNumber ofTotalVisitsPerEpisode(non-LUPA)	Home Health Agency	Avg_num_tot_visits_per_episode_non_lupa	copied as it is

11	stg_hha	AverageNumber ofSkilledNursing VisitsPerEpisode (non-LUPA)	Home Health Agency	Avg_num_skilled_n ursing_visits_per_e pisode_non_lupa	copied as it is
12	stg_hha	AverageNumber ofPTVisitsPerEpi sode(non-LUPA)	Home Health Agency	Avg_num_pt_visits_ per_episode_non_l upa	copied as it is
13	stg_hha	AverageNumber ofOTVisitsPerEpi sode(non-LUPA)	Home Health Agency	Avg_num_ot_visits_ per_episode_non_l upa	copied as it is
14	stg_hha	AverageNumber ofSTVisitsPerEpi sode(non-LUPA)	Home Health Agency	Avg_num_st_visits_ per_episode_non_l upa	copied as it is
15	stg_hha	AverageNumber ofHomeHealthAi deVisitsPerEpiso de(non-LUPA)	Home Health Agency	Avg_num_HHA_visi ts_per_episode_non _lupa	copied as it is
16	stg_hha	AverageNumber ofMedical- SocialVisitsPerEp isode(non-LUPA)	Home Health Agency	Avg_num_social_m edical_visits_per_ep isode_non_lupa	copied as it is
17	stg_hha	TotalHHACHarge Amount(non- LUPA)	Home Health Agency	tot_hha_charged_a mt_non_lupa	copied as it is
18	stg_hha	TotalHHAMedica rePaymentAmou nt(non-LUPA)	Home Health Agency	tot_hha_mediare_p ayment_amt_non_l upa	copied as it is
19	stg_hha	TotalHHAMedica reStandardPaym entAmount(non- LUPA)	Home Health Agency	tot_hha_std_mediare _payment_amt_no n_lupa	copied as it is

20	stg_hha	OutlierPayments asaPercentofMe dicarePaymentA mount(non- LUPA)	Home Health Agency	Outlier_payment_p er_medicare_paym ent_amt_non_lupa	copied as it is
21	stg_hha	TotalLUPAEpisod es	Home Health Agency	tot_lupa_episode	copied as it is
22	stg_hha	TotalHHAMedica rePaymentAmou ntforLUPAs	Home Health Agency	tot_hha_medicare_ payment_lupa	copied as it is
23	stg_hha	AverageAge	Home Health Agency	avg_age	copied as it is
24	stg_hha	MaleBeneficiarie s	Home Health Agency	Male_Beneficiaries	copied as it is
25	stg_hha	FemaleBeneficia ries	Home Health Agency	Female_Beneficiarie s	copied as it is
26	stg_hha	NondualBenefici aries	Home Health Agency	Nondual_Beneficiari es	copied as it is
27	stg_hha	DualBeneficiarie s	Home Health Agency	dual_Beneficiaries	copied as it is
28	stg_hha	WhiteBeneficiari es	Home Health Agency	White_Beneficiaries	copied as it is
29	stg_hha	BlackBeneficiarie s	Home Health Agency	black_Beneficiaries	copied as it is
30	stg_hha	AsianPacificslan derBeneficiaries	Home Health Agency	Asian_Pacific_Island er_Beneficiaries	copied as it is
31	stg_hha	HispanicBenefici aries	Home Health Agency	Hispanic_Beneficiari es	copied as it is
32	stg_hha	AmericanIndiano rAlaskaNativeBe neficiaries	Home Health Agency	American_Indian_or _Alaska_Native_Ben eficiaries	copied as it is

33	stg_hha	Other/Unknown Beneficiaries	Home Health Agency	Other_Unknown_Beneficiaries	copied as it is
34	stg_hha	AverageHCCScore	Home Health Agency	avg_HCC_Score	copied as it is
35	stg_hha	PercentofBeneficiarieswithAtrialFibrillation	Home Health Agency	per_of_Beneficiaries_with_Atrial_Fibrillation	copied as it is
36	stg_hha	PercentofBeneficiarieswithAlzheimer's	Home Health Agency	per_of_Beneficiaries_with_Alzheimer's	copied as it is
37	stg_hha	PercentofBeneficiarieswithAsthma	Home Health Agency	per_of_Beneficiaries_with_Asthma	copied as it is
38	stg_hha	PercentofBeneficiarieswithCancer	Home Health Agency	per_of_Beneficiaries_with_Cancer	copied as it is
39	stg_hha	PercentofBeneficiarieswithCHF	Home Health Agency	per_of_Beneficiaries_with_CHF	copied as it is
40	stg_hha	PercentofBeneficiarieswithChronicKidneyDisease	Home Health Agency	per_of_Beneficiaries_with_Chronic_Kidney_Disease	copied as it is
41	stg_hha	PercentofBeneficiarieswithCOPD	Home Health Agency	per_of_Beneficiaries_with_COPD	copied as it is
42	stg_hha	PercentofBeneficiarieswithDepression	Home Health Agency	per_of_Beneficiaries_with_Depression	copied as it is
43	stg_hha	PercentofBeneficiarieswithDiabetes	Home Health Agency	per_of_Beneficiaries_with_Diabetes	copied as it is
44	stg_hha	PercentofBeneficiarieswithHyperlipidemia	Home Health Agency	per_of_Beneficiaries_with_Hyperlipidemia	copied as it is

45	stg_hha	PercentofBeneficiarieswithHypertension	Home Health Agency	per_of_Beneficiaries_with_Hypertension	copied as it is
46	stg_hha	PercentofBeneficiarieswithIHD	Home Health Agency	per_of_Beneficiaries_with_IHD	copied as it is
47	stg_hha	PercentofBeneficiarieswithOsteoporosis	Home Health Agency	per_of_Beneficiaries_with_Osteoporosis	copied as it is
48	stg_hha	PercentofBeneficiarieswithRA/OA	Home Health Agency	per_of_Beneficiaries_with_RA_OA	copied as it is
49	stg_hha	PercentofBeneficiarieswithSchizophrenia	Home Health Agency	per_of_Beneficiaries_with_Schizophrenia	copied as it is
50	stg_hha	PercentofBeneficiarieswithStroke	Home Health Agency	per_of_Beneficiaries_with_Stroke	copied as it is

**Inpatient
Source**

sr.no	Columns	Description	DataSize(Bytes)
1	DRG Definition	It includes 3 digit code and description identifying the MS-DRG. It is a group representation of similar clinical conditions.	123
2	Provider Id	It is five to six digit number which is called CMS Certification Number (CCN) assigned to the Medicare certified hospital facility.	32
3	Provider Name	The name of provider healthcare institute.	81
4	Provider Street Address	First address line of provider	71
5	Provider City	City name of the providers' location.	55
6	Provider State	two character id for state from providers' location	51
7	Provider Zip Code	Zipcode of providers' location	32

8	Hospital Referral Region (HRR) Description	It includes both state and city information where provider is located.	60
9	Total Discharges	The number of discharges billed by the provider for inpatient hospital services.	32
10	Average Covered Charges	The provider's average charge for services covered by Medicare for all discharges in the MS-DRG.	32
11	Average Total Payments	The average total payments to all providers for the MS-DRG including the MS-DRG amount, teaching, disproportionate share, capital, and outlier payments for all cases.	32
12	Average Medicare Payments	The average amount that Medicare pays to the provider for Medicare's share of the MS-DRG.	32

Staging

Sr.no	Columns	Datatype
1	DRGDefinition	varchar
2	ProviderId	int
3	ProviderName	varchar(255)
4	ProviderStreetAddress	varchar(255)
5	ProviderCity	varchar(200)
6	ProviderState	varchar(150)
7	ProviderZipCode	int
8	HospitalReferralRegion(HRR)Description	varchar
9	TotalDischarges	int
10	AverageCoveredCharges	varchar
11	AverageTotalPayments	varchar
12	AverageMedicarePayments	varchar

Mapping of Data Fields

sr.no	Source Table	Source field	Destination Table	Destination Field	Logic
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1	stg_inpatient	DRGDefinition	destination_inpatient	drg_id	perform lookup against LK_drg and stored the Primary key of the lookup table as a foreign key
2	stg_inpatient	ProviderId	destination_inpatient	provider_code	perform lookup against LK_provider and stored the Primary key of the lookup table as a foreign key
3	stg_inpatient	ProviderName	destination_inpatient	provider_name	provider_name
4	stg_inpatient	ProviderStreetAddress	destination_inpatient	provider_street_address_1	provider_street_address_1
5	stg_inpatient	ProviderCity	destination_inpatient	provider_city_id	perform lookup against LK_city and stored the Primary key of the lookup table as a foreign key
6	stg_inpatient	ProviderState	destination_inpatient	provider_state_id	perform lookup against LK_state and stored the Primary key of the lookup table as a foreign key
7	stg_inpatient	ProviderZipCode	destination_inpatient	provider_zip_id	perform lookup against LK_zip and stored the Primary key of the lookup table as a foreign key

8	stg_inpatient	HospitalReferralRegion (HRR)Description	destination_inpatient	hrr_id	perform lookup against LK_hrr and stored the Primary key of the lookup table as a foreign key
9	stg_inpatient	TotalDischarges	destination_inpatient	TotalDischarges	copied as it is
10	stg_inpatient	AverageCoveredCharges	destination_inpatient	AverageCoveredCharges	copied as it is
11	stg_inpatient	AverageTotalPayments	destination_inpatient	AverageTotalPayments	copied as it is
12	stg_inpatient	AverageMedicarePayments	destination_inpatient	AverageMedicarePayments	copied as it is

Outpatient Source

	Columns	Description	DataSize(Bytes)
1	Provider ID	It is five to six digit number which is called CMS Certification Number (CCN) assigned to the Medicare certified hospital facility.	32
2	Provider Name	The name of provider healthcare institute.	81
3	Provider Street Address	First address line of provider	71
4	Provider City	City name of the providers' location.	55
5	Provider State	two character id for state from providers' location	51
6	Provider Zip Code	Zipcode of providers' location	32

7			
	Provider HRR	It includes both state and city information where provider is located in STATE - CITY format.	60
8			
	APC	APCs or Ambulatory Payment Classifications are the United States government's method of paying for facility outpatient services for the Medicare (United States) program.	32
9			
	APC Description	The description of the APC Code.	94
10			
	Beneficiaries	The number of Medicare fee-for-service beneficiaries receiving outpatient hospital services.	32

11	Comprehensive APC Services	The number of primary HCPCS services billed by the provider for outpatient hospital services.	32
12	Average Estimated Total Submitted Charges	The provider's average estimated submitted charge for services covered by Medicare for the APC.	32
13	Average Medicare Allowed Amount	The average of total regular payments the provider receives for the APC.	32
14	Average Medicare Payment Amount	The average of total regular payments the provider receives directly from Medicare.	32

15			
	Outlier Comprehensive APC Services	The number of comprehensive APC services with outlier payments.	32

Staging

Sr.no	Columns	Datatype
1	ProviderID	int
2	ProviderName	varchar
3	ProviderStreetAddress	varchar(255)
4	ProviderCity	varchar(200)
5	ProviderState	varchar(150)
6	ProviderZipCode	int
7	ProviderHRR	varchar
8	APC	varchar
9	APCDescription	varchar
10	Beneficiaries	int
11	ComprehensiveAPCServices	int
12	AverageEstimatedTotalSubmittedCharges	varchar
13	AverageMedicareAllowedAmount	varchar
14	AverageMedicarePaymentAmount	varchar
15	OutlierComprehensiveAPCServices	varchar
16	AverageMedicareOutlierAmount	varchar

Mapping of Data Fields

Source Table	Source field	Destination Table	Destination Field	Logic
stg_inpatient	ProviderID	destination_outpatient	provider_code	perform lookup against LK_provider and stored the Primary key of the lookup table as a foreign key
stg_inpatient	ProviderName	destination_outpatient	provider_first_name	copied as it is
stg_inpatient	ProviderStreetAddress	destination_outpatient	provider_street_address_1	copied as it is
stg_inpatient	ProviderCity	destination_outpatient	provider_city_id	perform lookup against LK_city and stored the Primary key of the lookup table as a foreign key

stg_inpatient	ProviderState	destination_outpatient	provider_state_id	perform lookup against LK_state and stored the Primary key of the lookup table as a foreign key
stg_inpatient	ProviderZipCode	destination_outpatient	provider_zip_id	perform lookup against LK_zip and stored the Primary key of the lookup table as a foreign key
stg_inpatient	ProviderHRR	destination_outpatient	hrr_id	perform lookup against LK_hrr and stored the Primary key of the lookup table as a foreign key
stg_inpatient	APC	destination_outpatient	apc_id	perform lookup against LK_apc and stored the Primary key of the lookup table as a foreign key
stg_inpatient	APCDescription	destination_outpatient	varchar	coped as it is
stg_inpatient	Beneficiaries	destination_outpatient	int	coped as it is
stg_inpatient	ComprehensiveAPCServices	destination_outpatient	int	coped as it is
stg_inpatient	AverageEstimatedTotalSubmittedCharges	destination_outpatient	varchar	coped as it is
stg_inpatient	AverageMedicareAllowedAmount	destination_outpatient	varchar	coped as it is
stg_inpatient	AverageMedicarePaymentAmount	destination_outpatient	varchar	coped as it is
stg_inpatient	OutlierComprehensiveAPCServices	destination_outpatient	varchar	coped as it is
stg_inpatient	AverageMedicareOutlierAmount	destination_outpatient	varcahr	coped as it is