Center for Societal Benefit through Healthcare
Data Dictionary

Category	Measure	Description	Source	Year
Insurance Type	Insurance Type	Insurance type of population. 'All' indicates the combination of Commercial, Medicaid, Medicare FFS and Medicare Advantage insurance type. Note that only measures from claims data are insurance type specific	Sample of de-identified submitted claims data from 5 large provider clearinghouses with claims from Commercial, Medicare Advantage and Medicaid and CMS LDS Medicare FFS data 5% sample	2017
Geography	FIPS County Code	FIPS County Code		
	State	State		
	State Code	State Code		
	Population	Resident population	American Community Survey, 5-year Estimate	2018
COVID-19	Deaths from COVID-19	Number of deaths from COVID-19	USAFACTS	2020
	Cases of COVID-19	Number of cases from COVID-19		
	Deaths from COVID-19 per 100k Population	Deaths from COVID-19 per 100k Population		
	Cases of COVID-19 per 100k Population	Cases of COVID-19 per 100k Population		
	New COVID-19 Cases in the Past 14 Days per 100k Population	New COVID-19 Cases in the Past 14 Days per 100k Population		
	Change in Total COVID-19 Cases in the Past 14 Days	Change in Total COVID-19 Cases in the Past 14 Days		
	New COVID-19 Case Growth Over Last 14 Days	New COVID-19 Case Growth Over Last 14 Days		
Age	Age 60+	Percentage of population aged 60+	American Community Survey, 5-year Estimate	2018
	Age 70+	Percentage of population aged 70+		
	Age 80+	Percentage of population aged 80+		
Chronic Conditions	Asthma	Percentage of population (based on claims data sample) with an asthma diagnosis in the prior 12 months. Asthma diagnosis is identified based on CCW specifications	Sample of de-identified submitted claims data from 5 large provider clearinghouses with claims from Commercial, Medicare Advantage and Medicaid and CMS LDS Medicare FFS data 5% sample	2017
	Cancer	Percentage of population (based on claims data sample) with a cancer diagnosis in the prior 12 months. Cancer diagnosis is identified based on CCW specifications		
	Chronic Kidney Disease	Percentage of population (based on claims data sample) with a chronic kidney disease diagnosis in the prior 12 months. Chronic kidney disease diagnosis is identified based on CCW specifications		
	Chronic Liver Disease	Percentage of population (based on claims data sample) with a chronic liver disease diagnosis in the prior 12 months. Chronic liver disease diagnosis is identified based on CCW specifications		
	COPD	Percentage of population (based on claims data sample) with a COPD diagnosis in the prior 12 months. COPD diagnosis is identified based on CCW specifications		
	Coronary Heart Disease	Percentage of population (based on claims data sample) with a coronary heart disease diagnosis in the prior 12 months. Coronary heart disease diagnosis is identified based on CCW specifications		
	Diabetes	Percentage of population (based on claims data sample) with a diabetes diagnosis in the prior 12 months. Diabetes diagnosis is identified based on CCW specifications		
	Heart Failure	Percentage of population (based on claims data sample) with a heart failure diagnosis in the prior 12 months. Heart failure diagnosis is identified based on CCW specifications		
	Hypertension	Percentage of population (based on claims data sample) with a hypertension diagnosis in the prior 12		

		months. Hypertension diagnosis is identified based on CCW specifications		
	Obesity	Percentage of the adult population (age 20 and older) that reports a body mass index (BMI) greater than or equal to 30 kg/m2	United States Diabetes Surveillance System	2016
	2+ COVID-19-Relevant Chronic Conditions	Percentage of population (based on claims data sample) with 2 or more relevant COVID-19 chronic condition diagnosis (see individual chronic conditions above)	Sample of de-identified submitted claims data from 5 large provider clearinghouses with claims from Commercial, Medicare Advantage and Medicaid and CMS LDS Medicare FFS data 5% sample	2017
	Any COVID-19-Relevant Chronic Condition or Age 60+	Percentage of population (based on claims data sample) aged 60+ or with a relevant COVID-19 chronic condition diagnosis (see individual chronic conditions above)		
	Any COVID-19-Relevant Chronic Condition	Percentage of population (based on claims data sample) with a relevant COVID-19 chronic condition diagnosis (see individual chronic conditions above)		
Behavioral Health	Anxiety	Percentage of population (based on claims data sample) with an anxiety diagnosis in the prior 12 months	Sample of de-identified submitted claims data from 5 large provider clearinghouses with claims from Commercial, Medicare Advantage and Medicaid and CMS LDS Medicare FFS data 5% sample	2017
	Bipolar	Percentage of population (based on claims data sample) with a bipolar diagnosis in the prior 12 months		
	Depression	Percentage of population (based on claims data sample) with a depression diagnosis in the prior 12 months		
	Substance Use Disorder	Percentage of population (based on claims data sample) with a substance use disorder diagnosis in the prior 12 months		
	Excessive Drinking	Percentage of adults reporting binge or heavy drinking	Behavioral Risk Factor Surveillance System via Robert Wood Johnson County Health Rankings	2017
	Opioid Use Disorder	Percentage of population (based on claims data sample) with an opioid use disorder diagnosis in the prior 12 months	Sample of de-identified submitted claims data from 5 large provider clearinghouses with claims from Commercial, Medicare Advantage and Medicaid and CMS LDS Medicare FFS data 5% sample	2017
	Tobacco Use	Percentage of adults who are current smokers	Behavioral Risk Factor Surveillance System via Robert Wood Johnson County Health Rankings	2017
	Any Behavioral Health Condition	Percentage of population (based on claims data sample) with any behavioral health condition diagnosis in the prior 12 months	Sample of de-identified submitted claims data from 5 large provider clearinghouses with claims from Commercial, Medicare Advantage and Medicaid and CMS LDS Medicare FFS data 5% sample	2017
	Behavioral Health High Needs	Percentage of population (based on claims data sample) with a high-needs behavioral health diagnosis or utilization in the prior 12 months. Included behavioral health diagnosis include: schizophrenia, bipolar disorder with psychosis, major depression with psychosis, attempted suicide, homicidal ideation. Included behavioral health utilization include acute behavioral health related care for bipolar without psychosis, major depression without psychosis, other depression, PTSD, SUD, conduct disorder, personality disorders, psychosis, ODD, eating disorders		
Long-Term Services and Supports	Nursing Home Residents per 100k Population	Number of nursing home residents per 100,000 population	Census	2010
	Percent Nursing Homes with Poor Ratings	Percentage of nursing homes with a poor rating. A poor rating is defined as a rating of 1 or 2	Nursing Home Compare	2020

Healthcare Supply	Acute Hospital Beds per 100k Population	Acute hospital beds per 100,000 population	Hospital Compare; Medicare Provider Cost Report	2020; 2019
	Primary Care Physicians per 100k Population	Primary care physicians per 100,000 population	NPPES NPI Registry	2019
	Primary Care Providers per 100k Population	Primary care providers per 100,000 population. This includes physicians and mid-level providers		
	Mental Health Providers per 100k Population	Mental health providers per 100,000 population. This includes psychiatrists, psychologists, social workers, therapists, psychiatric PAs/NPs		
	Psychiatrists per 100k Population	Psychiatrists per 100,000 population		
	Psychologists per 100k Population	Psychologists per 100,000 population		
Social / Community Factors: Population Density	Population Density	Population per square mile	U.S Census Bureau; American Community Survey, 5-year estimates	2010; 2018
	Rural Population	Percentage of population living in a rural area	Census Population Estimates	2010
Social / Community Factors: Economy and Jobs	Poverty Rate	Percentage of population living below poverty level	American Community Survey, 5-year estimates	2018
	Below 50% Federal Poverty Level	Percentage of population living below 50% of the federal poverty level	American Community Survey, 5-year estimates	2018
	Unemployment Rate	Percentage of population ages 16 and older unemployed but seeking work	Bureau of Labor Statistics	2018
	Employed Population with At Risk Jobs	Percentage of employed in at risk jobs	McKinsey Global Institute	2020
Social / Community Factors: Government Assistance	State Government Assistance (Algorex)	Estimates the proportion of persons who have government assistance (SNAP or SSI) as part of their income. Derived from multiple US Census values on tables S2201 and B19056. Represented as a 0 to 10 index	Algorex	2020
Social / Community Factors: Housing and Household Composition	Homeless Persons per 100k Population	Number of homeless individuals per 100,000 population	Housing and Urban Development Annual Homeless Assessment Report	2019
	Homeless Indicator (Algorex)	Estimates the proportion of persons who live as either sheltered or unsheltered homeless. Derived from US Department of Housing and Urban Development data. Represented as a 0 to 10 index. N/A indicates that there is no available homelessness data for this geography	Algorex	2020
	Housing Insecurity	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities	Comprehensive Housing Affordability Strategy (CHAS) data via Robert Wood Johnson County Health Rankings	2016
	Large Households (Algorex)	Estimates the proportion of persons who are in large households (greater than or equal to 4 persons). Derived from multiple US Census values on S2501. Represented as a 0 to 10 index	Algorex	2020
	Children from Single-parent Households	Percentage of children that live in a household headed by single parent	American Community Survey, 5-year estimates	2018

Social / Community Factors: Community	Neighborhood Stress Score (Algorex)	The Neighborhood Stress Score builds on a model originally designed by the University of Massachusetts, which is used for risk adjustment in the state of MA. This score, known as NSS for short, uses seven census block group variables to establish an index with which neighborhoods can be compared to each other. The index is composed of the following seven values:
		   – % of population under 100% FPL
		   – % of population under 200% FPL
		   – % population with no high school diploma
		   – Unemployment rate
			Algorex	2020

		– % of population with single parent households – % of population with no car – % of population receiving public assistance The score is a decimal calculated using a Z-Score based on the statewide population, with a score of 0 being the state mean. A negative score indicates below average stress, and a positive score indicates higher than average stress. It is calculated on the census block group level, so all individuals residing in the same census block group will have the same NSS		
	Social Isolation Score (Algorex)	The Social Isolation Score is a proprietary Algorex Health model that is intended to identify members who are at risk of being isolated and lacking social supports. Inputs include access to public transportation, vehicle ownership, household composition, and neighborhood factors. This model is often used to identify target members for a togetherness program or home visit. The model output is a score represented as decimal on a scale of 0 through 10, with higher scores indicating greater likelihood of isolation. The value that is shown is the mean score for all sample	Algorex	2020
	Adverse Childhood Experiences Score (Algorex)	Score estimating the prevalence of SDOH factors derived from Adverse Childhood Experiences studies, a CDC-Kaiser Permanente investigation of the influence of childhood abuse and other household challenges influencing health later in life. It uses inputs for housing, food access, occupation/income, and harm which are the ACEs domains. This model is experimental. Values range 0 to 10, with higher scores indicating higher social impact on the individual	Algorex	2020
	SDoH Composite Score (Algorex)	The SDOH Composite Stress Score is a proprietary Algorex Health model that measures compound stress caused by social influences on an individual. This model uses over 150 inputs (including age and variables such as household size and residence type) and has been trained against clinical and utilization outcomes on a Medicaid population across multiple states. The score is particularly useful when assessing member or patient risk when the individual is lacking claims or clinical information, or when included as an additional factor on top of existing clinical risk scores. The model output is a score represented as a decimal on a scale of 0 through 10, with higher scores indicating greater social determinant stress on the member. The value that is shown is the mean score for all sample persons residing in the respective geographic area	Algorex	2020
Social / Community Factors: Transportation	Transportation Access Score (Algorex)	The Transportation Access Score is a proprietary Algorex Health data science model which measures access to public transportation and vehicle ownership rate for each census block group. This score is beneficial when identifying members for an intervention relating to healthcare visits and no-show reduction, as well as members in need of transport to non-clinical locations such as grocery stores. The model output is a score is represented as a decimal on a 0 to 10 scale, with higher scores indicating worse access to public and private transportation. All individuals that reside in the same census block group will have the same score	Algorex	2020

	Public Transit Access Score (Algorex)	Estimates level of public transit access and usage in the geography. Derived from Z-Score of Census Table S0801 means of commuting to work. Represented as a 0 to 10 index	Algorex	2020
	Vehicle Access Score (Algorex)	Estimates level of vehicle access and usage in the geography. Derived from Z-Score of Census Table S2504 means of commuting to work. Represented as a 0 to 10 index	Algorex	2020
Social / Community Factors: Crime and Incarceration	Incarceration Rate	Number of incarcerated adults and juveniles per 100,000 population	Census	2010
	Violent Crime Rate	Number of reported violent crime offenses per 100,000 population	Uniform Crime Reporting – FBI via Robert Wood Johnson County Health Rankings	2014 & 2016
Social / Community Factors: Insurance Coverage	Medicaid Coverage	Percentage of population that has Medicaid coverage	Medicaid and CHIP Enrollment	2019
	Medicare Coverage	Percentage of population that has Medicare coverage	CMS Medicare Enrollment Dashboard	2019
	Uninsured	Percentage of adults under age 65 without health insurance	Small Area Health Insurance Estimates	2017
Social / Community Factors: Food Security	SNAP Benefits	Percentage of households receiving food stamps or SNAP	American Community Survey, 5-year estimates	2018
	Food Insecurity	Percentage of population who lack adequate access to food	Map the Meal Gap data via Robert Wood Johnson County Health Rankings	2017
	Food Access Score (Algorex)	The Food Access Score is a proprietary Algorex Health data science model which combines physical and economic access to food. Physical Access uses industry standard retail grocery classifications and divides outlets into four groups (Group A, Group B, Group C, and Group D) based on quality and size. Each member is then routed to outlets by walking, driving, and transit times. Members are then scored based on travel time required to reach the highest quality grocery store (Groups A through D). Economic Access calculates relative affordability of food for the household based on size, combined relative household income, and other demographic characteristics. Food Access is a combination of these two components. The resulting scores are decimals ranging from 0-10. A high score indicates worse overall access to high quality food. The model is used to target food-based interventions such as delivery, meal supplementation, and SNAP enrollment support. The model does not consider choice, only access. The value that is shown is the mean score for all sample persons residing in the respective geographic area	Algorex	2020
	Children on Free or Reduced Lunch	Percentage of children enrolled in public schools that are eligible for free or reduced-price lunch	National Center for Education Statistics via Robert Wood Johnson County Health Rankings	2017
Social / Community Factors: Race and Ethnicity	American Indian or Alaska Native	Percentage of population that is American Indian or Alaska Native	American Community Survey, 5-year Estimate	2018
	Asian	Percentage of population that is Asian	American Community Survey, 5-year Estimate	2018
	Black or African American	Percentage of population at is Black or African American	American Community Survey, 5-year estimates	2018
	Hispanic	Percentage of population that is Hispanic	American Community Survey, 5-year Estimate	2018
	Native Hawaiian or Other Pacific Islander	Percentage of population that is Native Hawaiian or Other Pacific Islander	American Community Survey, 5-year Estimate	2018
	Non-Hispanic White	Percentage of population that is non-Hispanic White	American Community Survey, 5-year Estimate	2018

	Other Race	Percentage of population that is Other race	American Community Survey, 5-year Estimate	2018
	2 or more Races	Percentage of population that is two or more races	American Community Survey, 5-year Estimate	2018
	Racial/Ethnic Minority	Percentage of population that is not non-Hispanic White	American Community Survey, 5-year Estimate	2018
QE Measures	Comprehensive Diabetes Care – HbA1c Testing	The percentage of patients 18-75 years of age with diabetes (type 1 and type 2) who received an HbA1c test during the measurement year. This measure (NQF 0057) is endorsed by the National Quality forum (NQF) and was calculated following specifications from the measure steward (NCQA)	Medicare QE data and a national sample of de-identified submitted claims data from 5 large provider clearinghouses with claims from Commercial, Medicare Advantage and Medicaid data	2017
	Comprehensive Diabetes Care – Eye Exam	The percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had an eye exam (retinal) performed. This measure (NQF 0055) is endorsed by the National Quality forum (NQF) and was calculated following specifications from the measure steward (NCQA)		
	Comprehensive Diabetes Care – Medical Attention for Nephropathy	The percentage of patients 18-75 years of age with diabetes (type 1 and type 2) who received a nephropathy screening test or monitoring test or had evidence of nephropathy during the measurement year. This measure (NQF 0062) is endorsed by the National Quality forum (NQF) and was calculated following specifications from the measure steward (NCQA)		
	Follow-up after Hospitalization for Mental Illness – 7 Days; 30 Days	The percentage of discharges for patients 6 years of age and older who were hospitalized for treatment of selected mental illness diagnoses and who had a follow-up visit with a mental health practitioner. Two rates are reported: - The percentage of discharges for which the patient received follow-up within 30 days of discharge - The percentage of discharges for which the patient received follow-up within 7 days of discharge. This measure (NQF 0576) is endorsed by the National Quality forum (NQF) and was calculated following specifications from the measure steward (NCQA)		
	Follow-up after Emergency Department Visit for Mental Illness – 7 Days; 30 Days	The percentage of emergency department (ED) visits for members 6 years of age and older with a principal diagnosis of mental illness, who had a follow-up visit for mental illness. Two rates are reported: - The percentage of ED visits for which the member received follow-up within 30 days of the ED visit (31 total days). - The percentage of ED visits for which the member received follow-up within 7 days of the ED visit (8 total days). This measure (NQF 3489) is endorsed by the National Quality forum (NQF) and was calculated following specifications from the measure steward (NCQA)		

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CMS-LDS Medicare FFS

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