Medicare Durable Medical Equipment, Devices & Supplies - by Geography and Service Data Dictionary		
Term Name	**Variable Name**	**Definition**
Geography Level	Rfrg_Prvdr_Geo_Lvl	Identifies the level of geography that the data in the row has been aggregated. A value of 'State' indicates the data in the row is aggregated to a single state identified in the Referring Provider Geography Description column for a given HCPCS Code Level. A value of 'National' indicates the data in the row is aggregated across all states for a given HCPCS Code Level.
Referring Provider Geography Code	Rfrg_Prvdr_Geo_Cd	FIPS code of the referring provider state. This variable is blank when reported at the national level.
Referring Provider Geography Description	Rfrg_Prvdr_Geo_Desc	The state name where the provider is located, as reported in NPPES. The values include the 50 United States, District of Columbia, U.S. territories, Armed Forces areas, Unknown and Foreign Country. Data aggregated at the National level are identified by the word 'National'.
BETOS Level	BETOS_Lvl	High level grouping of the BETOS Classifications into three groups including Durable Medical Equipment, Prosthetic and Orthotic Devices, and Drugs and Nutritional Products.
BETOS Code	BETOS_Cd	Berenson-Eggers Type of Service (BETOS) classification code aassigned to the HCPCS code. The BETOS coding system consists of readily understood clinical categories that permit objective assignment of HCPCS codes. Classifications are based on the Berenson-Eggers Type of Service (BETOS) classification codes associated with Healthcare Common Procedure Coding System (HCPCS) code. Durable Medical Equipment (DME) include the following BETOS codes: D1A, D1B, D1C, D1D, D1E, D1G. Prosthetics and Orthotics (PO) include the following BETOS codes: D1F Drug and Nutritional Products include the following BETOS codes: O1C, O1D, O1E, O1G and all other unclassified codes.
BETOS Description	BETOS_Desc	Berenson-Eggers Type of Service (BETOS) description assigned to the BETOS code. The BETOS coding system consists of readily understood clinical categories that permit objective assignment of HCPCS codes.
HCPCS_Code	HCPCS_Cd	HCPCS code for the specific DMEPOS products/services ordered by referring providers and rendered by suppliers.
HCPCS Description	HCPCS_Desc	Description of the HCPCS code for the specific DMEPOS product/service ordered by referring providers and rendered by suppliers.
Supplier Rental Indicator	Suplr_Rentl_Ind	Identifies whether the DMEPOS products/services submitted on supplier claims are identified as rental.
Number of Referring Providers	Tot_Rfrg_Prvdrs	Number of referring providers ordering DMEPOS products/services.
Number of Suppliers	Tot_Suplrs	Number of suppliers rendering DMEPOS products/services.
Number of Supplier Beneficiaries	Tot_Suplr_Benes	Total number of unique beneficiaries associated with DMEPOS claims submitted by suppliers and ordered by the referring provider. Beneficiary counts fewer than 11 have been suppressed to protect the privacy of Medicare beneficiaries.
Number of Supplier Claims	Tot_Suplr_Clms	Total number of DMEPOS claims submitted by suppliers, reflecting services ordered by referring providers.
Number of Supplier Services	Tot_Suplr_Srvcs	Number of DMEPOS products/services rendered by suppliers; note that the metrics used to count the number provided can vary from service to service.
Average Supplier Submitted Charges	Avg_Suplr_Sbmtd_Chrg	Average of the charges that suppliers submitted for the DMEPOS product/service. Total supplier submitted charges can be calculated by multiplying the average supplier submitted charges by the number of supplier services.

Medicare Durable Medical Equipment, Devices & Supplies - by Geography and Service Data Dictionary		
Term Name	**Variable Name**	**Definition**
Average Supplier Medicare Allowed Amount	Avg_Suplr_Mdcr_Alowd_Amt	Average of the supplier Medicare allowed amounts for the DMEPOS product/service. Medicare allowed amounts include the amount Medicare pays, the deductible and coinsurance amounts that the beneficiary is responsible for paying, and any amounts that a third party is responsible for paying. Total supplier Medicare allowed amounts can be calculated by multiplying the average supplier Medicare allowed amount by the number of supplier services.
Average Supplier Medicare Payment Amount	Avg_Suplr_Mdcr_Pymt_Amt	Average amount that Medicare paid suppliers after deductible and coinsurance amounts have been deducted for the line item DMEPOS product/service. Total supplier Medicare payment amounts can be calculated by multiplying the average supplier Medicare payment amount by the number of supplier services.
Average Supplier Medicare Standard Payment Amount	Avg_Suplr_Mdcr_Stdzd_Amt	Average amount that Medicare paid after beneficiary deductible and coinsurance amounts have been deducted for the line item DMEPOS product/service and after standardization of the Medicare payment has been applied. Standardization removes geographic differences in payment rates for individual product/services and makes Medicare payments across geographic areas comparable. Note: This variable is available starting with the calendar year 2014 data.