

System Requirements Specification Centers for Medicare & Medicaid Services

 ${\bf Medicare.gov/Hospital Compare\ Downloadable\ Databases}$

Table of Contents

Document Purpose	3
Background	3
Hospital Compare Measures Description/Background and Reporting Cycles	4
Data Collection Period Information	7
Access Downloadable File Contents	8
Access Data Content Summary	9
CSV Revised Flat Files and Data.Medicare.gov Data File Summary	27
CSV Revised Flat Files and Data.Medicare.gov Data Content Summary	29
Appendix A – Hospital Compare Measures	70
Appendix B – HCAHPS Survey Question Listing	75
Appendix C – Footnote Crosswalk	77

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
 - o 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/	The HCAHPS Patient Survey is a 32-item survey instrument and data collection methodology
Background	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, <u>www.HCAHPSonline.org</u> .
Reporting	The collection period for the HCAHPS measures is 12 months. The HCAHPS measures are
Cycle	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	Ziminomo	202014	6/30/2011
h	-	-		
		" 1 ZU11	IUWIL	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

MSAccess file name:
Hospital.zip
Hospital.pdf
Readme.txt
Access Table Names
Hvbp_tps_05_28_2013
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	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	lataset
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
(<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
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_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
	ULMEMB_DVT_RATE	Memo
PSI_12_POSTOP_P	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_B	ETTER	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_PULMEMB_DVT_TOOFEW		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
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	EHIS_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_WORSE		Memo
PSI_90_SAFETY_SAME		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	Description AHRQ PSI measures national results	
Column Name		DDB Data Type
MSR_CD		Memo
NATIONAL		Memo
PSI_NATIONAL_SCR		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_ED	Process of Care — Emergency Department
		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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_ED_State	Process of Care — Emergency Department
		State Results
Description	Process of Care—Emergency Department me	easures state-level 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>)	vwHQI_HOSP_ED_National	Process of Care — Emergency Department
		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	Physical: Access	Business
(<u>Back to Table Listing</u>)	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

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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	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
scr		Memo
footnote		Memo

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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	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 Ra	ate Percent	Text(50)
Footnote		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	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 D	escription	Memo
HCAHPS Answer Po	ercent	Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_US_NATIONAL_HCAHPS_	HCAHPS National Results
	MSR	
Description	escription HCAHPS measures national results	
Column Name		DDB Data Type
HCAHPS Measure 0	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
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
State		Memo
ZIP Code		Memo
County Name		Memo
AMI-7a Performanc	e Rate	Memo
AMI-7a Achievemen	nt Points	Memo
AMI-7a Improvement Points		Memo
AMI-7a Measure Sc	ore	Memo
AMI-8a Performance Rate		Memo
AMI-8a Achievement Points		Memo
AMI-8a Improvement Points		Memo
AMI-8a Measure Sc	ore	Memo
AMI Condition/Proc	cedure Score	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_hai_05_28_2013	HVBP Healthcare-Associated Infections
		Results
Description	Hospital Value-Based Purchasing	Healthcare-Associated Infections results
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
State		Memo
ZIP Code		Memo
County Name		Memo
SCIP-Inf-1 Perform		Memo
SCIP-Inf-1 Achieve	ment Points	Memo
SCIP-Inf-1 Improvement Points		Memo
SCIP-Inf-1 Measure Score		Memo
SCIP-Inf-2 Performance Rate		Memo
SCIP-Inf-2 Achieve		Memo
SCIP-Inf-2 Improve		Memo
SCIP-Inf-2 Measure		Memo
SCIP-Inf-3 Perform		Memo
SCIP-Inf-3 Achieve		Memo
SCIP-Inf-3 Improve		Memo
SCIP-Inf-3 Measure		Memo
SCIP-Inf-4 Performance Rate		Memo
SCIP-Inf-4 Achievement Points		Memo
SCIP-Inf-4 Improvement Points		Memo
SCIP-Inf-4 Measure		Memo
HAI Condition/Proc	edure 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 r	results
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
State		Memo
ZIP Code		Memo
County Name		Memo
Communication with Nurses Achievement Points		Memo
Communication with Nurses Improvement Points		Memo
Communication with	n Nurses Dimension 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
Communication with	h Doctors Achievement Points	Memo
Communication with	h Doctors Improvement Points	Memo
Communication with	h Doctors Dimension Score	Memo
Responsiveness of H	Hospital Staff Achievement Points	Memo
Responsiveness of H	Hospital Staff Improvement Points	Memo
	Hospital Staff Dimension Score	Memo
Pain Management A		Memo
Pain Management Ir	nprovement Points	Memo
Pain Management D		Memo
Communication abo	out Medicines Achievement Points	Memo
	out Medicines Improvement Points	Memo
Communication abo	out Medicines Dimension Score	Memo
Cleanliness and Quietness of Hospital Environment Achievement		Memo
Po		
Cleanliness and Quietness of Hospital Environment Improvement		Memo
Po		
	etness of Hospital Environment Dimension	Memo
Scor		
	on Achievement Points	Memo
Discharge Information 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		Memo
HCAHPS Consisten	cy Score	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_hf_05_28_2013	HVBP Process of Care—Heart Failure
		Results
Description	Hospital Value-Based Purchasing Process of	Care—Heart Failure results
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
State		Memo
ZIP Code		Memo
County Name		Memo
HF-1 Performance Rate		Memo
HF-1 Achievement P	oints	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_hf_05_28_2013	HVBP Process of Care—Heart Failure
		Results
Description	Hospital Value-Based Purchasing Process of	Care—Heart Failure results
Column Name		DDB Data Type
HF-1 Improvement P	oints	Memo
HF-1 Measure Score		Memo
HF-1 Condition/Proce	edure Score	Memo

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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_scip_05_28_2013	HVBP Process of Care—Surgical
		Improvement Care Program Results
Description	Hospital Value-Based Purchasing Process of	Care—Surgical Improvement Care Program
	results	
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
State		Memo
ZIP Code		Memo
County Name	·	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	Hvbp_scip_05_28_2013	HVBP Process of Care—Surgical
		Improvement Care Program Results
Description	Hospital Value-Based Purchasing Process of	Care—Surgical Improvement Care Program
	results	
Column Name		DDB Data Type
SCIP-Card-2 Perform	mance Rate	Memo
SCIP-Card-2 Achiev	vement Points	Memo
SCIP-Card-2 Improv	vement Points	Memo
SCIP-Card-2 Measure Score		Memo
SCIP-VTE-1 Perform	mance Rate	Memo
SCIP-VTE-1 Achievement Points		Memo
SCIP-VTE-1 Improvement Points		Memo
SCIP-VTE-1 Measure Score		Memo
SCIP-VTE-2 Performance Rate		Memo
SCIP-VTE-2 Achievement Points		Memo
SCIP-VTE-2 Improvement Points		Memo
SCIP-VTE-2 Measure Score		Memo
SCIP Condition/Procedure Score		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	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
Provider Number		Memo
Hospital Name		Memo
Address		Memo
City		Memo
State		Memo
ZIP Code		Memo
County Name		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 S	core	Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_IMG_XWLK	Outpatient Imaging Efficiency Hospital
		Results
Description	Outpatient Imaging Efficiency measures hosp	oital-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)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_STATE_IMG_AVG	Outpatient Imaging Efficiency State
		Results
Description	Outpatient Imaging Efficiency measures state-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	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_US_NATIONAL_IMG_AVG	Outpatient Imaging Efficiency National
		Results
Description	Outpatient Imaging Efficiency measures nation	onal results
Column Name		DDB Data Type
Condition		Text(22)
Measure Code		Text(25)
Measure Name		Memo
Score		Text(50)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_IMM	Process of Care — Immunization Hospital
		Results
Description	Process of Care—Immunization measures ho	spital-level results
Column Name		DDB Data Type
prvdr_id		Memo
msr_cd		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	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
scr		Memo
footnote		Memo
Sample		Memo

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_IMM_State	Process of Care — Immunization State
		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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	vwHQI_HOSP_IMM_National	Process of Care — Immunization National
		Results
Description	Process of Care — Immunization 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_MORTALITY_READ	30-Day Mortality and Readmission
	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 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)

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_MORTALITY_READ	30-Day Mortality and Readmission
	M_XWLK	Hospital Results
Description	30-Day Mortality and Readmission measures hospital-level results	
Column Name	DDB Data Type	
Footnote		Text(50)

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

Table Name	Physical: Access	Business
(<u>Back to Table Listing</u>)	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_l	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 res	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
(<u>Back to Table Listing</u>)	dbo_vwHQI_STATE_MPV_MSR	Medicare Volume State Results
Description	Medicare Volume measures state-level result	S
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
(<u>Back to Table Listing</u>)	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	
(<u>Back to Table Listing</u>) vwHQI_HOSP_SPP		Medicare Spending Per Patient Hospital	
		Results	
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	
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_SPP_State	Medicare Spending Per Patient State	
		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	t value Memo		

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

Table Name	Physical: Access	Business	
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_STRUCTURAL_XW	Structural Hospital Results	
	LK		
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 Readmission 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
(<u>Back to Table Listing</u>)	dbo_vwHQI_HOSP_MSR_XWLK	Process of Care Hospital Results
Description	Process of Care measures hospital-level result	ts
Column Name		DDB Data Type
Provider Number		Memo
Hospital Name	spital Name Memo	
State	Text(2)	
Condition	ition Memo	
Measure Code	asure Code Text(25)	
Measure Name		Memo
Score		Text(50)
Sample Text(50)		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	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	
(<u>Back to Table Listing</u>)	dbo_vwHQI_PCTL_MSR_XWLK	Process of Care Top Percentile Scores	
_			
Description	Scores achieved by the top ten (10) percent of	f hospitals and the national average score for	
	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_General_Information	Hospital General Information	
Measure_Dates	Measure Dates	
Hospital_Footnote_Crosswalk	Hospital Footnote Crosswalk	
Hospital_ACS_Measures	Hospital ACS Measures	
Agency_For_Healthcare_Research_And_Quality_Me	Agency for Healthcare Research and Quality	
asures	Measures	
Agency_For_Healthcare_Research_And_Quality_Stat	Agency for Healthcare Research and Quality - State	
e_Measures	Measures	
Agency_For_Healthcare_Research_And_Quality_Nat	Agency for Healthcare Research and Quality -	
ional_Measures	National Measures	
Emergency_Department_Care_Measures	Emergency Department Care Measures	
Emergency_Department_Care_Measures_State	Emergency Department Care Measures - State	
Emergency_Department_Care_Measures_National	Emergency Department Care Measures - National	
Healthcare_Associated_Infections	Healthcare Associated Infections	
Healthcare_Associated_Infections_State_Measures	Healthcare Associated Infections - State Measures	
Healthcare_Associated_Infections_National	Healthcare Associated Infections National	
Hospital_Acquired_Condition_Measures	Hospital Acquired Condition Measures	
Hospital_Acquired_Condition_National_Measures	Hospital Acquired Condition - National Measures	
Survey_of_Patients_Hospital_Experiences_HCAHPS	Survey of Patients' Hospital Experiences (HCAHPS)	
Survey_of_Patients_Hospital_Experiences_HCAHPS _State_Average	Survey of Patients' Hospital Experiences (HCAHPS) - State Average	
Survey_of_Patients_Hospital_Experiences_HCAHPS _National_Average	Survey of Patients' Hospital Experiences (HCAHPS) - National Average	
Hospital_Value_Based_Purchasing_HVBP_Acute_M	Hospital Value-Based Purchasing (HVBP) – Acute	
yocardial_Infarction_Scores	Myocardial Infarction Scores	
Hospital_Value_Based_Purchasing_HVBP_Healthcar	Hospital Value-Based Purchasing (HVBP) –	
e_Associated_Infection_Scores	Healthcare-Associated Infection Scores	
Hospital_Value_Based_Purchasing_HVBP_Patient_E	Hospital Value-Based Purchasing (HVBP) – Patient	
xperience_of_Care_Domain_Scores_HCAHPS_	Experience of Care Domain Scores (HCAHPS)	
Hospital_Value_Based_Purchasing_HVBP_Heart_Fa	Hospital Value-Based Purchasing (HVBP) – Heart	
ilure_Scores	Failure Scores	
Hospital_Value_Based_Purchasing_HVBP_Pneumon	Hospital Value-Based Purchasing (HVBP) –	
ia_Scores	Pneumonia Scores	
Hospital_Process_of_Care_Measures_Surgical_Care_	Hospital Value-Based Purchasing (HVBP) – Surgical	
Improvement_Project_Scores	Care Improvement Project Scores	

CSV Revised file name:	Data.Medicare.gov	
Hospital_Revised_flatfiles.zip		
Hospital_Value_Based_Purchasing_HVBP_Total_Per	Hospital Value-Based Purchasing (HVBP) – Total	
formance_Scores	Performance Scores	
Preventive_Care_Measures	Preventive Care Measures	
Preventive_Care_Measures_State	Preventive Care Measures - State	
Preventive_Care_Measures_National	Preventive Care Measures - National	
Medicare_Spending_Per_Patient	Medicare Spending Per Patient	
Medicare_Spending_Per_Patient_State	Medicare Spending Per Patient - State	
Medicare_Spending_Per_Patient_National	Medicare Spending Per Patient - National	
Spending_Breakdown_by_Claim	Spending Breakdown by Claim	
Hospital_Medicare_Volume_Measures	Hospital Medicare Volume Measures	
Hospital_Medicare_Volume_Measures_State_Averag	Hospital Medicare Volume Measures - State Average	
e e		
Hospital_Medicare_Volume_Measures_National_Av	Hospital Medicare Volume Measures - National	
erage	Average	
Hospital_Outcome_Of_Care_Measures	Hospital Outcome Of Care Measures	
Hospital_Outcome_Of_Care_Measures_State	Hospital Outcome Of Care Measures - State	
Hospital_Outcome_Of_Care_Measures_National_Av	Hospital Outcome Of Care Measures - National	
erage	Average	
Use_Of_Medical_Imaging_Measures	Use Of Medical Imaging Measures	
Use_Of_Medical_Imaging_Measures_State	Use Of Medical Imaging Measures - State	
Use_Of_Medical_Imaging_Measures_National	Use Of Medical Imaging Measures - National	
Hospital_Process_of_Care_Measures_Children_s_Ast	Hospital Process of Care Measures - Children's	
hma	Asthma	
Hospital_Process_Of_Care_Measures_Heart_Attack	Hospital Process of Care Measures - Heart Attack	
Hospital_Process_Of_Care_Measures_Heart_Failure	Hospital Process of Care Measures - Heart Failure	
Hospital_Process_Of_Care_Measures_Pneumonia	Hospital Process of Care Measures - Pneumonia	
Hospital_Process_of_Care_Measures_Surgical_Care_	Hospital Process of Care Measures - Surgical Care	
Improvement_Project	Improvement Project	
Hospital_Process_of_Care_Measures_State_Average	Hospital Process of Care Measures - State Average	
Hospital_Process_of_Care_Measures_National_Aver	Hospital Process of Care Measures - National	
age	Average	
Hospital_Readmission_Reduction	Hospital Readmission Reduction	
Hospital_Structural_Measures_Cardiac_Surgery_Reg	Hospital Structural Measures - Cardiac Surgery	
istry	Registry	
Hospital_Compare_CASPER_ASPEN_Contacts	Hospital Compare - CASPER/ASPEN Contacts	
American_College_of_Cardiology_Percutaneous_Cor	American College of Cardiology Percutaneous	
onary_Intervention_PCI_Readmission_Measure	Coronary Intervention (PCI) Readmission Measure	

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 (<u>Back to Table</u>	Physical: Revise File	ed CSV Flat	Physical: Data.Medicare.gov	Business
<u>Listing</u>)	Hospital_Genera	al_Information	Hospital General Information	Hospital Characteristics
Description	General informa	tion on hospital	s within the dataset	
CSV Revised File	Column Name	Data.Medica	are.gov Column Name	DDB Data Type
Provider Number		Provider Nur	nber	Memo
Hospital Name		Hospital Nan	ne	Memo
Address 1		Address1		Memo
Address 2		Address2		Memo
Address 3		Address3		Memo
City		City		Memo
State		State		Text(2)
ZIP Code		ZIP Code		Text(5)
County		County Nam	e	Text(25)
Phone Number		Phone Numb	er	Text(10)
Hospital Type		Hospital Typ	e	Text(50)
Hospital Ownersh	ip	Hospital Ow	ner	Text(100)
Emergency Service	es	Emergency S	Services	Text(50)
		Location		Memo

Table Name (Back to Table Listing)	· ·		Physical: Data.Medicare.gov	Business	3
	Measure_Dates	3	Measure Dates	Measure	Data Collection
				Periods	
Description	Current collect	ion dates for av	vailable measures included in the	ne Downlo	adable Database
CSV Revised File Column Name Data.Med			re.gov Column Name		DDB Data Type
Measure Name		Measure Nan	ne		Memo
Measure Start Quarte	er	Measure Star	t Quarter		Memo
Measure Start Date		Measure Star	t Date		Memo
Measure End Quarte	r	Measure End	Quarter		Memo
Measure End Date		Measure End	Date		Memo

Table Name	Physical: Revise	d CSV Flat	Physical:	Business	S
(<u>Back to Table</u>	File		Data.Medicare.gov		
<u>Listing</u>)	Hospital_Footnote_Crosswalk I		Hospital Footnote	Footnotes	
			Crosswalk		
Description	Look up table for	footnote text i	n the various data files		
CSV Revised File Column Name Data.Medica		Data.Medica	re.gov Column Name		DDB Data Type
Footnote		Footnote			Text (50)
FootnoteText		Footnote Tex	t		Memo

Table Name (Back to Table Listing)			Physical: Data.Medicare.gov	Business
	Hospital_ACS	_Measures	Hospital ACS Measures	Hospital ACS Measures
Description	American Coll	ege of Surgeon	is (ACS) hospital-level results	
CSV Revised File (Column Name	Data.Medica	are.gov Column Name	DDB Data Type
CCN		CCN		Text (6)
Hospital Name		Hospital Nan	ne	Memo
Surg65		Surg65		Memo
Surg65_FN		Surg65_FN		Memo
Colon	Colon Colon			Memo
Colon_FN		Colon_FN		Memo
LowExtBypass		LowExtBypa	iss	Memo
LowExtBypass_FN		LowExtBypa	ass_FN	Memo

Table Name (Back to Table Listing)	•		Physical: Busi Data.Medicare.gov		Business	
	Agency_For_Healthcar	re_Re	Agency for Healthcare	AHRQ PS	SI Hospital Results	
	search_And_Quality_N	A easu	Research and Quality			
	res		Measures			
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	Address 1 Ad		Address 1		Memo	
Address 2	Address 2		ess 2		Memo	
Address 3		Addr	Address 3		Memo	
City		City	City		Memo	
State		State	State		Text(2)	
ZIP Code		ZIP (IIP Code		Text(5)	
County Name		Coun	ounty Name		Text(25)	
Phone Number		Phon	hone Number		Text(10)	
Death from serious treatable complications Death		eath from serious treatable complications		Memo		
after surgery after			after surgery			
Footnote - Death from serious treatable		Footnote - Death from serious treatable		ble	Memo	
complications after s	surgery	complications after surgery				

Table Name Physical: Revised CSV			Physical: Business		
	ıt File	Data.Medicare.gov			
Ag	ency_For_Healthcar	re_Re	Agency for Healthcare	AHRQ PS	SI Hospital Results
sea	rch_And_Quality_N	A easu	Research and Quality		
res			Measures		
	IRQ PSI measures h				
CSV Revised File Colu			Medicare.gov Column Name		DDB Data Type
Collapsed lung due to me			psed lung due to medical treatn		Memo
Footnote - Collapsed lun	g due to medical	Footn	ote - Collapsed lung due to me	dical	Memo
treatment		treatn			
Serious blood clots after			us blood clots after surgery		Memo
Footnote - Serious blood		Footn	ote - Serious blood clots after s	surgery	Memo
A wound that splits open			und that splits open after surger	•	Memo
Footnote - A wound that	splits open after	Footn	ote - A wound that splits open	after	Memo
surgery		surge	•		
Accidental cuts and tears	from medical	Accid	lental cuts and tears from medic	cal	Memo
treatment		treatn			
Footnote - Accidental cu	ts and tears from		ote - Accidental cuts and tears	from	Memo
medical treatment			cal treatment		
	Serious Complications		us Complications	Memo	
Footnote - Serious Complications		Footnote - Serious Complications			Memo
Number of Patients - Death from serious		Number of Patients - Death from serious			Memo
treatable complications after surgery			ble complications after surgery		
Rate - Death from serious treatable		Rate - Death from serious treatable			Memo
complications after surge		complications after surgery			
Lower Estimate - Death		Lower Estimate - Death from serious treatable			Memo
treatable complications a		complications after surgery			
Higher Estimate - Death		Higher Estimate - Death from serious			Memo
treatable complications a		treatable complications after surgery			
Number of Patients - Col	lapsed lung due to	Number of Patients - Collapsed lung due to			Memo
medical treatment		medical treatment			3.6
Rate - Collapsed lung du	e to medical	Rate - Collapsed lung due to medical			Memo
treatment	11 1	treatment		3.6	
Lower Estimate - Collaps	sed lung due to	Lower Estimate - Collapsed lung due to		Memo	
medical treatment	11 1 /		cal treatment	- 4-	Mana
Higher Estimate - Collap	sed lung due to	_	er Estimate - Collapsed lung du	e to	Memo
medical treatment			cal treatment	1 - 4 C	M
Number of Patients - Serious blood clots			per of Patients - Serious blood of	nots after	Memo
after surgery Reta Socious blood clots often surgery		Surgery			Momo
	Rate - Serious blood clots after surgery Lower Estimate - Serious blood clots after		- Serious blood clots after surge		Memo
	s blood clots after		Lower Estimate - Serious blood clots after		Memo
Surgery Higher Estimate Seriou	a blood alota often	surge	•	a ofter	Mama
Higher Estimate - Seriou	s blood clots after	_	er Estimate - Serious blood clot	s arter	Memo
surgery		surge	ıy		

Table Name	Physical: Revised CS	V	Physical:	Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Agency_For_Healthcare_		Agency for Healthcare	AHRQ P	SI Hospital Results	
	search_And_Quality_N	A easu	Research and Quality			
	res		Measures			
Description	AHRQ PSI measures h					
CSV Revised File C	_		.Medicare.gov Column Name		DDB Data Type	
Number of Patients -	- A wound that splits	Numl	ber of Patients - A wound that s	splits	Memo	
open after surgery			after surgery			
Rate - A wound that	splits open after	Rate	- A wound that splits open after	surgery	Memo	
surgery						
	wound that splits open		er Estimate - A wound that split	s open	Memo	
after surgery		after surgery				
_	Higher Estimate - A wound that splits open		er Estimate - A wound that spli	Memo		
after surgery		after surgery				
	- Accidental cuts and	Number of Patients - Accidental cuts and			Memo	
tears from medical tr		tears from medical treatment				
Rate - Accidental cu	ts and tears from	Rate - Accidental cuts and tears from medical			Memo	
medical treatment		treatment			2.6	
	ecidental cuts and tears	Lower Estimate - Accidental cuts and tears			Memo	
from medical treatm			medical treatment	1.,	3.6	
	ccidental cuts and tears	Higher Estimate - Accidental cuts and tears			Memo	
	from medical treatment		medical treatment	: 4 : -	Mana	
Number of Patients - Serious		Number of Patients - Serious Complications			Memo	
Complications					Mana	
Rate - Serious Complications			- Serious Complications	Memo		
Lower Estimate - Se	•	Lower Estimate - Serious Complications			Memo	
Higher Estimate - Se	erious Complications	High	er Estimate - Serious Complica	tions	Memo	

Table Name	Physical: Revised CSV		Physical: Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Agency_For_Healthcar		Agency for Healthcare	AHRQ PS	SI State Results
	search_And_Quality_S	tate_	Research and Quality - State		
	Measures		Measures		
Description	AHRQ PSI measures s				
CSV Revised File C	Column Name	Data	Medicare.gov Column Name		DDB Data Type
State		State			Memo
Worse - Death from	serious treatable	Wors	e - Death from serious treatable	2	Memo
complications after s	surgery	comp	lications after surgery		
Same - Death from s	erious treatable	Same	- Death from serious treatable		Memo
complications after s	surgery	comp	lications after surgery		
Better - Death from		Bette	r - Death from serious treatable		Memo
complications after s	surgery	comp	lications after surgery		
Too few - Death from	m serious treatable	Too f	ew - Death from serious treatab	ole	Memo
complications after s	surgery		lications after surgery		
Worse - Collapsed lu	ang due to medical	Wors	e - Collapsed lung due to medic	cal	Memo
treatment		treatn			
Same - Collapsed lui	ng due to medical	Same	- Collapsed lung due to medica	al	Memo
treatment		treatment			
Better - Collapsed lu	ing due to medical	Better - Collapsed lung due to medical			Memo
treatment	treatment		nent		
Too few - Collapsed lung due to medical		Too f	ew - Collapsed lung due to med	dical	Memo
treatment		treatment			
Worse - Serious bloc	od clots after surgery	Worse - Serious blood clots after surgery			Memo
Same - Serious blood	d clots after surgery	Same - Serious blood clots after surgery			Memo
Better - Serious bloo		Better - Serious blood clots after surgery			Memo
Too few - Serious bl	ood clots after surgery	Too few - Serious blood clots after surgery			Memo
Worse - A wound th	at splits open after	Worse - A wound that splits open after			Memo
surgery		surgery			
Same - A wound tha	t splits open after	Same - A wound that splits open after surgery			Memo
surgery					
Better - A wound that	at splits open after	Better - A wound that splits open after			Memo
surgery		surgery			
Too few - A wound	that splits open after		ew - A wound that splits open a	after	Memo
surgery		surgery			
	rse - Accidental cuts and tears from		e - Accidental cuts and tears fro	om	Memo
medical treatment	. 1		cal treatment		3.6
	Same - Accidental cuts and tears from		- Accidental cuts and tears from	m	Memo
medical treatment		medical treatment			34
	Better - Accidental cuts and tears from		r - Accidental cuts and tears fro	m	Memo
	medical treatment		cal treatment	<u>^</u>	34
Too few - Accidenta	i cuts and tears from	Too few - Accidental cuts and tears from			Memo
medical treatment	1' ''	medical treatment			
Worse - Serious Complications			e - Serious Complications		Memo

Table Name	Physical: Revised CS	V Physical:		Business	
(<u>Back to Table Listing</u>)	Flat File 1		Data.Medicare.gov		
	Agency_For_Healthcare_Re		Agency for Healthcare	AHRQ PSI State Results	
	search_And_Quality_S	tate_	Research and Quality - State		
	Measures		Measures		
Description	AHRQ PSI measures st	tate-lev	vel results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Same - Serious Com	Serious Complications Sam		Same - Serious Complications		Memo
Better - Serious Complications Better		r - Serious Complications		Memo	
Too few - Serious C	omplications	Too f	ew - Serious Complications		Memo

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Agency_For_Healthcare_Re		Agency for Healthcare	AHRQ PS	SI National Results
			Research and Quality -	-	
	nal_Measures		National Measures		
Description	AHRQ PSI measures n	ational	l results		
CSV Revised File C	Column Name	Data.Medicare.gov Column Name			DDB Data Type
Measure		Meas	Measure		Memo
U S National Rate		U.S.	U.S. National Rate		Memo
National Patient Safety Measure Na		Natio	National Patient Safety Measure Performance		Memo
Performance	-		•		

Table Name (Back to Table	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business	
<u>Listing</u>)	Emergency_Department_Care_N	leasures	Emergency Department	Process of Care—	
			Care Measures	Emergency	
				Department Hospital	
				Results	
Description	Process of Care—Emergency De	partment	measure hospital-level resu	lts	
CSV Revised Fil	le Column Name	Data.M	edicare.gov Column Namo	e DDB Data	
				Type	
Provider ID		Provide	r ID	Memo	
Hospital Name	ospital Name H		l 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 Cod	le	Text(5)	
County Name		County	Name	Text(25)	
Phone Number		Phone N	lumber	Text(10)	
Measure M		Measure		Memo	
Rate		Rate		Memo	
Sample		Sample		Memo	

Table Name	Physical: Revised CSV Flat Fil	e	Physical:	Busine	ess
(<u>Back to Table</u>			Data.Medicare.gov		
<u>Listing</u>)	Emergency_Department_Care_Measures		Emergency Department	Proces	s of Care—
			Care Measures	Emerg	ency
				Depart	ment Hospital
				Results	S
Description	Process of Care—Emergency De	partment	measure hospital-level resu	lts	
CSV Revised File Column Name		Data.M	edicare.gov Column Name	e	DDB Data
					Type
Footnote		Footnote	e		Memo

Table Name (Back to Table Listing)	•		Physical: Data.Medicare.gov	Business		
	Emergency_Departmen	nt_Ca	Emergency Department	Process of	of Care—	
			Care Measures - State	Emergen	cy Department	
				State Res	sults	
Description	Process of Care—Emergency Department 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	
Rate (per 1,000 Discharges) Rate (ate (per 1,000 Discharges)		Memo		
Footnote		Footr	note		Memo	

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Emergency_Department_Ca		Emergency Department	Process of Care—	
	re_Measures_National		Care Measures - National	Emergency Department	
				National	Results
Description	Process of Care—Emergency Department Hospital Results measure national 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		Footr	note		Memo

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Healthcare_Associated_Infe		Healthcare Associated	Healthcare-Associated	
	ctions		Infections	Infections Hospital Results	
Description	Healthcare-Associated Infections measures hospital-level results				
CSV Revised File Column Name		Data	Pata.Medicare.gov Column Name		DDB Data Type
Provider ID		Provider ID			Memo
Hospital Name		Hospital Name			Memo
Address 1		Address 1			Memo
Address 2		Addr	ess 2		Memo

Table Name	Physical: Revised CSV		Physical:	Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Healthcare_Associated_Infe		Healthcare Associated	Healthcare-Associated		
	ctions		Infections	Infections Hospital Results		
Description	Healthcare-Associated	Healthcare-Associated Infections measures hospital-level results				
CSV Revised File Column Name		Data	.Medicare.gov Column Name		DDB Data Type	
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		Footr	note	•	Memo	
		Locat	tion	•	Memo	

Table Name	Physical: Revised CSV	7	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Healthcare_Associated_Infe		Healthcare Associated	Healthcare-Associated	
	ctions_State_Measures		Infections - State Measures	Infections State Results	
Description	Healthcare-Associated Infections measures state-level results				
CSV Revised File Column Name		Data	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 CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Healthcare_Associated_Infe		Healthcare Associated	Healthcare-Associated	
	ctions_National		Infections National	Infections National Results	
Description	Healthcare-Associated Infections measures national 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 1000 Discharges)			Memo
Footnote		Footr	note		Memo

Table Name			Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File 1		Data.Medicare.gov		
	Hospital_Acquired_Co	nditi	Hospital Acquired	Hospital-	Acquired
	on_Measures		Condition Measures	Condition	ns Hospital Results
Description	Hospital-Acquired Cor	ndition	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		Hosp	ital Name		Memo
Address 1		Addr	ess 1	Memo	
Address 2		Addr	ess 2	Memo	
Address 3		Addr	Address 3		Memo
City		City		Memo	
State		State	tate		Text(2)
ZIP Code		ZIP (ZIP Code		Text(5)
County Name		Coun	County Name		Text(25)
Phone Number Phone		one Number		Text(10)	
Measure Meas		asure		Memo	
Rate (per 1,000 Disc	charges)	Rate	te (per 1,000 Discharges)		Memo

Table Name	Physical: Revised CS	V	Physical:	Business	
(Back to Table Listing)	Flat File		Data.Medicare.gov		
	Hospital_Acquired_Conditi		Hospital Acquired	Hospital-	-Acquired
			Condition - National	Conditions National Result	
			Measures		
Description	Hospital-Acquired Con	dition	s measures national results		
CSV Revised File (Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Measure M		Meas	Measure		Memo
Score		Score	9		Memo

Table Name	Physical: Revised CSV F	lat	Physical:	Business	
(<u>Back to Table</u>	File		Data.Medicare.gov		
<u>Listing</u>)	Survey_of_Patients_Hospi	ital	Survey of Patients' Hospital	HCAHPS	Hospital Results
	_Experiences_HCAHPS_		Experiences (HCAHPS)		
Description	HCAHPS measures hospit	al-le	evel results		
CSV Revised Fi	le Column Name	Da	ta.Medicare.gov Column Nam	e	DDB Data Type
Provider Number	r	Provider Number			Memo
Hospital Name		Но	spital Name	Memo	
Address 1		Ad	dress 1	Memo	
Address 2		Address 2			Memo
Address 3		Address 3			Memo
City		City			Memo
State		Sta	State		Text(2)
ZIP Code		ZII	ZIP Code		Text(5)

Table Name	Physical: Revised CSV F	lat	Physical:	Business	
(<u>Back to Table</u>	File		Data.Medicare.gov		
<u>Listing</u>)	Survey_of_Patients_Hospi	ital	Survey of Patients' Hospital	HCAHPS	Hospital Results
	_Experiences_HCAHPS_		Experiences (HCAHPS)		
Description	HCAHPS measures hospit				
	ile Column Name		ta.Medicare.gov Column Nam	ie	DDB Data Type
County Name			unty Name		Text(25)
Phone Number			one Number		Text(10)
*	nts who reported that their		cent of patients who reported th	at their	Memo
nurses "Sometim			rses "Sometimes" or "Never"		
communicated v		-	nmunicated well.		
_	nts who reported that their		cent of patients who reported th		Memo
	' communicated well.		ses "Usually" communicated we		
	nts who reported that their		cent of patients who reported th		Memo
	communicated well.		ses "Always" communicated we		
	nts who reported that their		cent of patients who reported th	at their	Memo
doctors "Someting			ctors "Sometimes" or "Never"		
communicated v			nmunicated well.		
	nts who reported that their		cent of patients who reported th		Memo
	" communicated well.		ctors "Usually" communicated v		
	nts who reported that their		cent of patients who reported th		Memo
	s" communicated well.		ctors "Always" communicated w		
	nts who reported that they		cent of patients who reported th		Memo
	"Never" received help as		ometimes" or "Never" received h	nelp as	
soon as they war			on as they wanted.		
	nts who reported that they	Percent of patients who reported that they			Memo
•	red help as soon as they		sually" received help as soon as	they	
wanted.			nted.	1	3.6
	nts who reported that they	Percent of patients who reported that they			Memo
•	ed help as soon as they	"Always" received help as soon as they			
wanted.	-40 mm - man - m - 1 41 - 41 - 1		nted.	a4 41e - ! ::	Maras
	nts who reported that their	Percent of patients who reported that their			Memo
controlled.	times" or "Never" well	-	n was "Sometimes" or "Never"	well	
	nts who reported that their		ntrolled. The cent of patients who reported the	ot thoir	Memo
<u>*</u>	-				MEIIIO
	ly" well controlled. Its who reported that their	-	n was "Usually" well controlled		Memo
	ys" well controlled.	Percent of patients who reported that their pain was "Always" well controlled.			IMICILIO
	nts who reported that staff		cent of patients who reported th	Memo	
_	"Never" explained about		1		IVICIIIO
	e giving it to them.	"Sometimes" or "Never" explained about medicines before giving it to them.			
	nts who reported that staff		cent of patients who reported th		Memo
-	ned about medicines		sually" explained about medicin		TATCHIO
before giving it			ing it to them.	es octore	
serore giving it	to tiloiii.	511	ing it to thom.		1

Table Name	Physical: Revised CSV F	lat			
(Back to Table	File		Data.Medicare.gov		
<u>Listing</u>)	Survey_of_Patients_Hospi	tal	Survey of Patients' Hospital	HCAHPS	Hospital Results
	_Experiences_HCAHPS_		Experiences (HCAHPS)		
Description	HCAHPS measures hospit				
	le Column Name		ta.Medicare.gov Column Nam		DDB Data Type
	its who reported that staff		cent of patients who reported that		Memo
	ned about medicines		ways" explained about medicine	es before	
before giving it t			ing it to them.		3.5
	its who reported that their		cent of patients who reported that		Memo
	om were "Sometimes" or		m and bathroom were "Sometim	ies" or	
"Never" clean.	to resh a manager of the state of		ever" clean.	a4 41a a i u	Mama
	its who reported that their		cent of patients who reported that		Memo
	om were "Usually" clean.		m and bathroom were "Usually" cent of patients who reported that		Memo
	its who reported that their om were "Always" clean.		m and bathroom were "Always"		Memo
	its who reported that the		cent of patients who reported that		Memo
_	room was "Sometimes"		und their room was "Sometimes		Wiemo
or "Never" quiet			ever" quiet at night.	OI	
	its who reported that the		cent of patients who reported that	at the area	Memo
	room was "Usually" quiet	around their room was "Usually" quiet at			TVICINO
at night.	a result was esamily quies	nig			
	its who reported that the)	cent of patients who reported that	at the area	Memo
	room was "Always" quiet	around their room was "Always" quiet at			
at night.	•	night.			
Percent of patien	ts at each hospital who	Percent of patients who reported that			Memo
reported that YE	S they were given	YE	S,they were given information a	bout what	
information abou	ıt what to do during	to do during their recovery at home.			
recovery.					
	its who reported that they		cent of patients who reported that	Memo	
_	nformation about what to	were not given information about what to do			
	ecovery at home.		ing their recovery at home.		3.5
_	its who gave their hospital		cent of patients who gave their h		Memo
_	ower on a scale from 0		ng of 6 or lower on a scale from	U	
(lowest) to 10 (h			west) to 10 (highest).	nognital a	Memo
	ats who gave their hospital on a scale from 0 (lowest)		cent of patients who gave their h	-	Memo
to 10 (highest).	on a scale from 0 (lowest)	rating of 7 or 8 on a scale from 0 (lowest) to			
	ve their hospital a rating of	10 (highest). Patients who gave their hospital a rating of 9			Memo
	e from 0 (lowest) to 10	or 10 on a scale from 0 (lowest) to 10			1,101110
(highest).	2 113111 0 (10 11 001) 10 10	(highest).			
	its who reported NO they	Percent of patients who reported NO,they			Memo
	mend the hospital.		uld not recommend the hospital.	-	
	ats who reported YES they		cent of patients who reported YI		Memo
_	recommend the hospital.		uld probably recommend the hos	•	

Table Name	Physical: Revised CSV Fla		Business	
(<u>Back to Table</u>	File	Data.Medicare.gov		
<u>Listing</u>)	Survey_of_Patients_Hospita	l Survey of Patients' Hospital	HCAHPS	Hospital Results
	_Experiences_HCAHPS_	Experiences (HCAHPS)		
Description	HCAHPS measures hospital	-level results		
CSV Revised Fi	le Column Name	Data.Medicare.gov Column Nam	e	DDB Data Type
Patients who rep	orted YES they would	Percent of patients who reported YES, they		Memo
definitely recomi	mend the hospital.	would definitely recommend the hospital.		
Number of comp	eleted Surveys	Number of Completed Surveys		Memo
Survey Response Rate Su		Survey Response Rate Percent		Memo
Hospital Footnot	e l	Hospital Footnote		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business	Business	
	Survey_of_Patients_Hell_Experiences_HCAHllate_Average		Survey of Patients' Hospital Experiences (HCAHPS) - State Average	HCAHPS	S State Results	
Description	HCAHPS measures sta	ite-leve	Č			
CSV Revised File C			.Medicare.gov Column Name		DDB Data Type	
State		State	<u> </u>		Text(50)	
Percent of patients w nurses 'Sometimes' of communicated well.	who reported that their or 'Never'	nurse	ent of patients who reported that as "Sometimes" or "Never" nunicated well.	t their	Memo	
Percent of patients w nurses 'Usually' com	ho reported that their municated well.		ent of patients who reported that is "Usually" communicated wel		Memo	
Percent of patients w nurses 'Always' com	ho reported that their municated well.		ent of patients who reported that is "Always" communicated wel		Memo	
Percent of patients w doctors 'Sometimes' communicated well.	ho reported that their or 'Never'	docto	ent of patients who reported that ors "Sometimes" or "Never" nunicated well.	t their	Memo	
Percent of patients w doctors 'Usually' cor	who reported that their nmunicated well.		ent of patients who reported that ors "Usually" communicated we		Memo	
	ho reported that their		ent of patients who reported that ors "Always" communicated we		Memo	
·	who reported that they er' received help as	Perce "Som	ent of patients who reported that tetimes" or "Never" received he as they wanted.	t they	Memo	
•	who reported that they	Perce	ent of patients who reported that ally" received help as soon as the	•	Memo	
Percent of patients w 'Always' received he wanted.	ho reported that they lp as soon as they		ent of patients who reported that ays" received help as soon as the ed.		Memo	
Percent of patients w pain was 'Sometimes	who reported that their s' or 'Never' well		ent of patients who reported that was "Sometimes" or "Never" w		Memo	

Table Name	Physical: Revised CSV		Physical: Business		5	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Survey_of_Patients_He	_	Survey of Patients' Hospital	HCAHPS	S State Results	
	1_Experiences_HCAHPS_S		Experiences (HCAHPS) -			
	ate_Average		State Average			
Description	HCAHPS measures sta					
CSV Revised File C	Column Name		Medicare.gov Column Name	_	DDB Data Type	
controlled.		contro				
_	ho reported that their		nt of patients who reported that	their	Memo	
pain was 'Usually' w			was "Usually" well controlled.			
	ho reported that their		nt of patients who reported that	their	Memo	
pain was 'Always' we			was "Always" well controlled.			
	ho reported that staff		nt of patients who reported that		Memo	
'Sometimes' or 'Neve			etimes" or "Never" explained a	bout		
medicines before giv			cines before giving it to them.			
_	ho reported that staff		nt of patients who reported that		Memo	
-	bout medicines before		ally" explained about medicines	s before		
giving it to them.			g it to them.		7.5	
_	ho reported that staff		nt of patients who reported that		Memo	
	bout medicines before		ays" explained about medicines	before		
giving it to them.	1 11 1		g it to them.	.1 .	3.4	
	ho reported that their	Percent of patients who reported that their			Memo	
room and bathroom	were Sometimes or	room and bathroom were "Sometimes" or "Never" clean.				
'Never' clean.	.h. o o o d. 4h. o.4 4h. o.;			41:	Maria	
room and bathroom	who reported that their	Percent of patients who reported that their room and bathroom were "Usually" clean.			Memo	
					Memo	
room and bathroom	who reported that their	Percent of patients who reported that their			Memo	
Percent of patients w		room and bathroom were "Always" clean. Percent of patients who reported that the area			Memo	
	om was 'Sometimes' or	around their room was "Sometimes" or			Wichio	
'Never' quiet at night		"Never" quiet at night.				
Percent of patients w			nt of patients who reported that	the area	Memo	
_	om was 'Usually' quiet	around their room was "Usually" quiet at				
at night.		night.	• •			
Percent of patients w	ho reported that the		nt of patients who reported that	the area	Memo	
_	om was 'Always' quiet	around their room was "Always" quiet at				
at night.	, 1	night.	• 1			
Percent of patients at	t each hospital who	_	nt of patients who reported that	t	Memo	
reported that YES th			they were given information ab			
information about w	hat to do during	to do during their recovery at home.				
recovery.						
_	ho reported that they		nt of patients who reported that	•	Memo	
_	mation about what to	were not given information about what to do				
do during their recov			g their recovery at home.			
	ho gave their hospital		nt of patients who gave their ho		Memo	
a rating of 6 or lower	r on a scale from 0	rating	g of 6 or lower on a scale from 0)		

Table Name (Back to Table Listing)	Physical: Revised CS' Flat File	V	Physical: Data.Medicare.gov	Business	
	Survey_of_Patients_He	-	Survey of Patients' Hospital	HCAHPS	S State Results
	l_Experiences_HCAHI ate_Average	25_St	Experiences (HCAHPS) - State Average		
Description	HCAHPS measures sta	te-leve			
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
(lowest) to 10 (highe	est).	(lowe	est) to 10 (highest).		
Percent of patients w	ho gave their hospital	Perce	ent of patients who gave their ho	ospital a	Memo
_	a scale from 0 (lowest)	_	g of 7 or 8 on a scale from 0 (lo		
to 10 (highest).		10 (h	ighest).		
_	eir hospital a rating of	Percent of patients who gave their hospital a			Memo
9 or 10 on a scale from	om 0 (lowest) to 10	rating of 9 or 10 on a scale from 0 (lowest) to			
(highest).		10 (h	ighest).		
Percent of patients w	ho reported NO they	Percent of patients who reported NO, they			Memo
would not recommen	nd the hospital.	woul	d not recommend the hospital.		
Percent of patients who reported YES they			ent of patients who reported YE	Memo	
would probably recommend the hospital. would			d probably recommend the hosp	oital.	
Patients who reported YES they would Perc			ent of patients who reported YE	Memo	
definitely recommen	d the hospital.	woul	d definitely recommend the hos	pital.	

Table Name	Physical: Revised CSV	7	Physical:	Business	
(Back to Table Listing)	Flat File 1		Data.Medicare.gov		
	Survey_of_Patients_Ho	Survey_of_Patients_Hospita S		HCAHPS	S National Results
	1_Experiences_HCAHP	S_N	Experiences (HCAHPS) -		
	ational_Average		National Average		
Description	HCAHPS measures nati	onal r	results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
HCAHPS Question		HCAHPS Question			Memo
HCAHPS Answer Description HCA		HCAHPS Answer Description			Memo
HCAHPS Answer Po	ercent	HCA	HPS Answer Percent	·	Text(50)

Table Name (Back to Table Listing)	Physical: Revised CS' Flat File	V	Physical: Data.Medicare.gov	Business	
	Hospital_Value_Based chasing_HVBP_Acute cardial_Infarction_Sco	_Myo	Hospital Value-Based Purchasing (HVBP) - Acute Myocardial Infarction Scores	HVBP Pro AMI Resu	ocess of Care— ults
Description	Hospital Value Based I	Purchas	sing Acute Myocardial Infarction	on results	
CSV Revised File C	Column Name	Data.Medicare.gov Column Name			DDB Data Type
Provider Number		Provider Number			Memo
Hospital Name		Hosp	Hospital Name		Memo
Address		Address			Memo
City Cit		City			Memo
State		State			Memo

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital_Value_Based	_Pur	Hospital Value-Based	HVBP Pro	ocess of Care—
	chasing_HVBP_Acute	_Myo	Purchasing (HVBP) - Acute	AMI Resu	ılts
	cardial_Infarction_Sco	res	Myocardial Infarction		
			Scores		
Description			sing Acute Myocardial Infarction		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	:	DDB Data Type
ZIP Code		ZIP (Code		Memo
County Name		County Name			Memo
AMI-7a Performance	e Rate	AMI-	-7a Performance Rate		Memo
AMI-7a Achievemen	nt Points	AMI	-7a Achievement Points	Memo	
AMI-7a Improvement	nt Points	AMI	-7a Improvement Points	Memo	
AMI-7a Measure Sc	ore	AMI-	-7a Measure Score	Memo	
AMI-8a Performance	e Rate	AMI	AMI-8a Performance Rate		Memo
AMI-8a Achievemen	nt Points	AMI-8a Achievement Points			Memo
AMI-8a Improvemen	nt Points	AMI	AMI-8a Improvement Points		Memo
AMI-8a Measure Score AM		AMI	AMI-8a Measure Score		Memo
AMI Condition/Procedure Score AM		AMI	Condition Procedure Score		Memo
		Loca	tion		Memo
		Loca	tion		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	V Physical: Data.Medicare.gov		Business	
	Hospital_Value_Based_Pur		Hospital Value-Based	HVBP Hea	lthcare-
	chasing_HVBP_Health		Purchasing (HVBP) -	Associated	Infections
	_Associated_Infection_	_Scor	Healthcare-Associated	Results	
	es		Infection Scores		
Description	Hospital Value-Based l	Purcha	sing Healthcare-Associated Inf	ections resul	ts
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	Address Add		dress		Memo
City		City			Memo
State	State				Memo
ZIP Code	ZIP Code Zi		Code		Memo
County Name		Coun	ity Name		Memo
SCIP-Inf-1 Performa	ance Rate	SCIP	SCIP-Inf-1 Performance Rate		Memo
SCIP-Inf-1 Achiever	ment Points	SCIP-Inf-1 Achievement Points			Memo
SCIP-Inf-1 Improve	ment Points	SCIP-Inf-1 Improvement Points			Memo
SCIP-Inf-1 Measure		SCIP-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		SCIP-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

Table Name	Physical: Revised CSV		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital_Value_Based	_Pur	Hospital Value-Based	HVBP He	ealthcare-
	chasing_HVBP_Health	ncare	Purchasing (HVBP) -	Associate	d Infections
	_Associated_Infection_	_Scor	Healthcare-Associated	Results	
	es		Infection Scores		
Description	Hospital Value-Based	Iospital Value-Based Purchasing Healthcare-Associated Infections results			ılts
CSV Revised File C	Column Name	n Name Data.Medicar		:	DDB Data Type
SCIP-Inf-3 Achieven	SCIP-Inf-3 Achievement Points SCI		CIP-Inf-3 Achievement Points		Memo
SCIP-Inf-3 Improve	P-Inf-3 Improvement Points SCIP		IP-Inf-3 Improvement Points		Memo
SCIP-Inf-3 Measure	Score	SCIP	CIP-Inf-3 Measure Score		Memo
SCIP-Inf-4 Performa	ance Rate	SCIP	CIP-Inf-4 Performance Rate		Memo
SCIP-Inf-4 Achieven	ment Points	SCIP	P-Inf-4 Achievement Points		Memo
SCIP-Inf-4 Improve	ment Points	SCIP	P-Inf-4 Improvement Points		Memo
SCIP-Inf-4 Measure	Score	SCIP	-Inf-4 Measure Score		Memo
HAI Condition/Proc	edure Score	HAI	I Condition Procedure Score		Memo
		Loca	tion		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Busine Data.Medicare.gov		
	Hospital_Value_Based_Pur chasing_HVBP_				CAHPS Results
	Patient_Experience_of_Care		Patient Experience of Care		
	_Domain_Scores_HCAHP		Domain Scores (HCAHPS)		
Description	Hospital Value-Based l		·		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	:	DDB Data Type
Provider Number		Provi	der Number		Memo
Hospital Name	spital Name Ho		ital Name		Memo
Address	Address		ess	Memo	
City					Memo
State	State				Memo
ZIP Code	ZIP Code		Code		Memo
County Name		Coun	County Name		Memo
Communication with	Nurses Achievement	Com	Communication with Nurses Achievement		Memo
Points		Points			
Communication with	Nurses Improvement	Communication with Nurses Improvement			Memo
Points		Point	S		
Communication with	n Nurses Dimension	Communication with Nurses Dimension		sion	Memo
Score			Score		
Communication with	n Doctors Achievement	Communication with Doctors Achievement		vement	Memo
Points		Points			
Communication with	n Doctors Improvement	Communication with Doctors Improvement			Memo
Points		Points			

Table Name	Physical: Revised CSV		· · · · · · · · · · · · · · · · · · ·		SS	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Hospital_Value_Based	_Pur	Hospital Value-Based	HVBP HCAHPS Results		
	chasing_HVBP_		Purchasing (HVBP) -			
	Patient_Experience_of		Patient Experience of Care			
	_Domain_Scores_HCA	AHPS	Domain Scores (HCAHPS)			
	_					
Description	Hospital Value-Based		· ·		•	
CSV Revised File C			.Medicare.gov Column Name		DDB Data Type	
	n Doctors Dimension		munication with Doctors Dimer	nsion	Memo	
Score		Score				
Responsiveness of H	Iospital Staff		onsiveness of Hospital Staff		Memo	
Achievement Points			evement Points			
Responsiveness of H	Iospital Staff		onsiveness of Hospital Staff		Memo	
Improvement Points			ovement Points			
Responsiveness of H	Iospital Staff	Respo	onsiveness of Hospital Staff Dia	mension	Memo	
Dimension Score		Score				
Pain Management A	Pain Management Achievement Points		Management Achievement Poir	nts	Memo	
Pain Management Improvement Points		Pain Management Improvement Points			Memo	
Pain Management Dimension Score		Pain Management Dimension Score			Memo	
Communication about Medicines		Communication about Medicines			Memo	
Achievement Points		Achie	evement Points			
Communication about Medicines		Comi	munication about Medicines		Memo	
Improvement Points		Impro	ovement Points			
Communication about	ut Medicines	Communication about Medicines Dimension			Memo	
Dimension Score		Score				
Cleanliness and Quie	etness of Hospital	Cleanliness and Quietness of Hospital			Memo	
Environment Achiev	ement Points	Environment Achievement Points				
Cleanliness and Quie	etness of Hospital	Cleanliness and Quietness of Hospital		al	Memo	
Environment Improv	vement Points	Environment Improvement Points				
Cleanliness and Quie	etness of Hospital	Cleanliness and Quietness of Hospital		Memo		
Environment Dimen	sion Score	Environment Dimension Score				
Discharge Information	on Achievement Points	Discharge Information Achievement Points		Points	Memo	
Discharge Information	on Improvement Points	Disch	narge Information Improvement	Points	Memo	
Discharge Information	on Dimension Score	Disch	narge Information Dimension S	core	Memo	
Overall Rating of Ho	ospital Achievement	Overa	all Rating of Hospital Achieven	nent	Memo	
Points		Point				
Overall Rating of Ho	ospital Improvement	Overall Rating of Hospital Improvement			Memo	
Points		Points				
Overall Rating of Ho	ospital Dimension	Overall Rating of Hospital Dimension Score		on Score	Memo	
Score						
HCAHPS Base Scor	e	HCA	HCAHPS Base Score		Memo	
HCAHPS Consisten	cy Score	HCA	HPS Consistency Score		Memo	
		т			Mama	

Location

Memo

Table Name	Physical: Revised CSV		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital_Value_Based	_Pur	Hospital Value-Based	HVBP Pro	cess of Care—
	chasing_HVBP_Heart_	_Fail	Purchasing (HVBP) - Heart	Heart Failu	re Results
	ure_Scores		Failure Scores		
Description		Purcha	sing Process of Care—Heart Fa	ailure results	3
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	:	DDB Data Type
Provider Number		Provi	ider Number		Memo
Hospital Name		Hosp	ospital Name		Memo
Address	.ddress Addr		lress		Memo
City	ity City		y		Memo
State		State	e		Memo
ZIP Code		ZIP (Code		Memo
County Name		Cour	anty Name		Memo
HF-1 Performance R	Rate	HF-1	7-1 Performance Rate		Memo
HF-1 Achievement I	Points	HF-1	7-1 Achievement Points		Memo
HF-1 Improvement I	Points	HF-1	Improvement Points		Memo
HF-1 Measure Score	<u> </u>	HF-1	-1 Measure Score		Memo
HF-1 Condition/Prod	cedure Score	HF C	HF Condition Procedure Score		Memo
		Loca	tion		Memo

HVRP Surgical Care Improvement Purchasing (HVRP) - Surgical Care Improvement	Table	Physical: Revised CSV Flat File	Physical:	Business
Table HVRP Surgical Care Improvement Purchasing (HVRP) - Surgical Care Improvement	Name		Data.Medicare.gov	
		Hospital_Value_Based_Purchasing_	Hospital Value-Based	HVBP Process of Care—
		HVBP_Surgical_Care_Improvement	Purchasing (HVBP) -	Surgical Care Improvement
Listing) Project_Scores Listing Project_Scores Surgical Care Improvement Project Results	<u>Listing</u>)	_Project_Scores	Surgical Care Improvement	Project Results
Project Scores			Project Scores	
Descripti Hospital Value-Based Purchasing Process of Care—Surgical Care Improvement Project results	Descripti			
on	on			

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

Table	Physical: Revised CSV Flat Fi	le	Physical:	Business	
Name			Data.Medicare.gov		
(<u>Back to</u>	Hospital_Value_Based_Purchas	sing_	Hospital Value-Based	HVBP Pro	ocess of Care—
<u>Table</u>	HVBP_Surgical_Care_Improve	ment	Purchasing (HVBP) -	Surgical C	Care Improvement
<u>Listing</u>)	_Project_Scores		Surgical Care Improvement	Project Re	esults
			Project Scores		
Descripti	Hospital Value-Based Purchasing Process of Care—Surgical Care Improvement Project results				t Project results
on					
CSV Revise	ed File Column Name	Data	.Medicare.gov Column Name		DDB Data Type
SCIP-VTE-	2 Performance Rate	SCIP-VTE-2 Performance Rate			Memo
SCIP-VTE-	2 Achievement Points	SCIP	2-VTE-2 Achievement Points		Memo
SCIP-VTE-	2 Improvement Points	SCIP	2-VTE-2 Improvement Points		Memo
		P-VTE-2 Measure Score		Memo	
SCIP Condi	tion/Procedure Score	SCIP	Condition Procedure Score		Memo
		Loca	tion		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business
\ <u></u>	Hospital_Value_Based_Pur chasing_HVBP_Pneumonia		Hospital Value-Based Purchasing (HVBP) -	HVBP Process of Care— Pneumonia Results
Description	_Scores	Dunaha	Pneumonia Scores	nio magazita
Description CSV Revised File (sing Process of Care—Pneumo .Medicare.gov Column Name	
	Joinin Ivanic		<u> </u>	· ·
Provider Number			der Number	Memo
Hospital Name			ital Name	Memo
	Address Addr		ess	Memo
	City City			Memo
	State Sta			Memo
			Code	Memo
County Name			ty Name	Memo
PN-3b Performance			b Performance Rate	Memo
PN-3b Achievement			b Achievement Points	Memo
PN-3b Improvement			b Improvement Points	Memo
PN-3b Measure Scor	re	PN-3b Measure Score		Memo
PN-6 Performance R	Rate	PN-6 Performance Rate		Memo
PN-6 Achievement I	Points	PN-6	Achievement Points	Memo
PN-6 Improvement	Points	PN-6	Improvement Points	Memo
PN-6 Measure Score	2	PN-6	Measure Score	Memo
PN Condition/Proce	dure Score	PN C	Condition Procedure Score	Memo
		Loca	tion	Memo

Table Name (Back to Table Listing)	Physical: Revised CS' Flat File	V	Physical: Bu Data.Medicare.gov		Business	
	Hospital_Value_Based	_Pur	Hospital Value-Based	HVBP To	otal Performance	
	chasing_HVBP_Total_	Perfo	Purchasing (HVBP) - Total	Score Res	sults	
	rmance_Scores		Performance Scores			
Description	Overall performance so	ore for	r Hospital Value-Based Purcha	sing		
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		Code	Memo		
County Name		County Name			Memo	
Unweighted Normal	ized Clinical Process	Unweighted Normalized Clinical Process of			Memo	
of Care Domain Sco	re	Care Domain Score				
Weighted Clinical Pa	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 Ex	perience of Care	Weighted Patient Experience of Care Domain			Memo	
Domain Score		Score				
Total Performance S	core	Total Performance Score			Memo	
		Location		Memo		

Table Name	Physical: Revised CSV		Physical:	Business	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Preventive_Care_Measu	ıres	Preventive Care Measures	Process of	of Care—	
				Immuniz	ation Hospital	
				Results		
Description	Process of Care—Immu	ınizati	on measures hospital-level res	ults		
CSV Revised File C	Column Name Data	a.Med	licare.gov Column Name		DDB Data Type	
Provider ID		Provi	der ID		Memo	
Hospital Name	Hosp		pital Name		Memo	
Address 1	Addr		ress 1		Memo	
Address 2	Add		lress 2		Memo	
Address 3		Addr	ress 3		Memo	
City		City			Memo	
State		State			Text(2)	
ZIP Code		ZIP (Code		Text(5)	
County Name		Coun	nty Name		Text(25)	
Phone Number	Phon		one Number		Text(10)	
Measure		Meas	ure		Memo	
Rate		Rate			Memo	
Sample		Samp	ole		Memo	

Table Name	Physical: Revised CSV	Physical:	Business		
(<u>Back to Table Listing</u>)	Flat File	Data.Medicare.gov			
	Preventive_Care_Measures	Preventive Care Measures	Process of Care—		
			Immunization Hospital		
			Results		
Description	Process of Care—Immunization measures hospital-level results				
CSV Revised File C	d File Column Name Data.Medicare.gov Column Name DDB Data Ty				
Footnote	Footr	note	Memo		

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Preventive_Care_Measures		Preventive Care Measures -	Process of Care—	
	_State		State	Immuniza	tion State Results
Description	Process of Care—Immunization measure 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
Rate (per 1,000 Discharges) Rate ((per 1,000 Discharges)		Memo	
Footnote		Footr	note		Memo

Table Name	Physical: Revised CS	V	Physical:	Business	3
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Preventive_Care_Measures I		Preventive Care Measures -	Process of	of Care—
	_National		National	Immuniz	ation 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		Provi	Provider ID		Memo
Measure		Meas	Measure		Memo
Rate (per 1,000 Discharges) Rate		Rate	(per 1,000 Discharges)		Memo
Footnote		Footr	note		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	_
(Back to Table Eisting)			Ü	3.6.11	G 11 B
	Medicare_Spending_Pe	er_Pa	Medicare Spending Per		Spending Per
	tient		Patient	Patient Ho	ospital Results
Description	Medicare Spending Per	Medicare Spending Per Patient measures hospital-level results			
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Provider ID		Provider ID			Memo
Hospital Name		Hosp	ital Name		Memo
Address 1		Addr	ddress 1		Memo
Address 2	Address 2 Addr		ess 2		Memo
Address 3 Addr		ess 3		Memo	
City		City			Memo

Table Name	Physical: Revised CSV 1		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Medicare_Spending_Po	er_Pa	Medicare Spending Per	Medicare	Spending Per
	tient		Patient	Patient Ho	ospital Results
Description	Medicare Spending Per	Patier	nt measures hospital-level resul	ts	
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		Coun	County Name		Text(25)
Phone Number		Phon	hone Number		Text(10)
Measure		Meas	Measure		Memo
Spending per Hospital Patient with Spe		Spend	ding per Hospital Patient with M	Medicare	Memo
Medicare					
Footnote		Footr	note		Memo

Table Name	Physical: Revised CSV	I	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Medicare_Spending_Pe	er_Pa	Medicare Spending Per	Medicare	Spending Per
	tient_State		Patient - State	Patient St	ate 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		Provider ID			Memo
Measure	easure Meas		sure		Memo
Score Score				Memo	
Footnote		Footr	note		Memo

Table Name	Physical: Revised CSV	7	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Medicare_Spending_Per_Pa		Medicare Spending Per	Medicare Spending Per	
			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	Measure Meas		Measure		Memo
Score	Score Score		;		Memo
Footnote		Footn	iote		Memo

Table Name	•		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File]		Data.Medicare.gov		
	Spending_Breakdown_	by_	Spending Breakdown By	Medicare	Spending Per
	Claim		Claim	Patient - S	Spending
				Breakdow	n By Claim
Description	Medicare Spending Per	Patier	nt measures spending breakdow	n by claim	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	!	DDB Data Type
Hospital Name		Hosp	ital Name		Memo
Provider Number		Provider Number			Memo
State		State			Text (2)
Period		Perio	Period		Memo
Claim Type		Clain	Claim Type		Memo
Avg Spending Per E	pisode (Hospital)	Avg	vg 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	Avg Spending Per Episode (Nation)		Memo
Percent of Spending (Hospital) Per		Perce	Percent of Spending (Hospital)		Memo
Percent of Spending	(State)	Perce	Percent of Spending (State)		Memo
Percent of Spending	(Nation)	Perce	ent of Spending (Nation)		Memo

Table Name (Back to Table Listing)			Physical: Data.Medicare.gov	Business		
	Hospital_Medicare_Vo	olume	Hospital Medicare Volume	Medicare	Volume Hospital	
	_Measures		Measures	Results	_	
Description	Medicare Volume mea	sures h	ospital-level results			
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	2	DDB Data Type	
Provider Number		Provi	der Number		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		ZIPC	ZIP Code		Text(5)	
County Name		Coun	County Name		Text(25)	
Phone Number		Phon	Phone Number		Text(10)	
Diagnosis Related Group Di		Diag	Diagnosis Related Group		Text(25)	
Number Of Cases Nu		Num	Number Of Cases		Text(50)	
Footnote		Footr	Footnote		Memo	

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital_Medicare_Volume I		Hospital Medicare Volume	Medicare Volume State	
	_Measures_State_Average		Measures - State Average	Results	
Description	Medicare Volume measures state results				
CSV Revised File C	Column Name	Data.Medicare.gov Column Name		!	DDB Data Type
State		State			Text(50)
Diagnosis Related G	roup	Diagi	Diagnosis Related Group		Text(25)
Number Of Cases	Number Of Cases Numb		ber Of Cases		Text(50)
Footnote		Footr	note		Memo

Table Name	Dhariagh Daviged CCV	7	Dhyaical	Durgin agg	
Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
(Buck to Tubic Eisting)	Hospital_Medicare_Vo	lume	Hospital Medicare Volume	Medicare	Volume National
			Measures - National	Results	
	ge		Average		
Description	Medicare Volume meas	sures n	ational results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Diagnosis Related Group Diagnosis		Diagnosis Related Group			Text(25)
Number Of Cases		Numl	ber Of Cases		Text(50)

Table Name	Physical: Revised CSV		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital_Outcome_Of_	_Care	Hospital Outcome Of Care	30-Day M	Iortality and
	_Measures		Measures	Readmiss	ion Hospital
				Results	
Description	30-Day Mortality and I	Readm	ission measures hospital-level i	esults	
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 Number		Text(10)	
	ath (Mortality) Rates	Hospital 30-Day Death (Mortality) Rates		Rates	Memo
from Heart Attack		from Heart Attack			
1 *	Rate - Hospital 30-Day	Comparison to U.S. Rate - Hospital 30-Day			Memo
Death (Mortality) Rates from Heart Attack		Death (Mortality) Rates from Heart Attack			
Lower Mortality Estimate - Hospital 30-		Lower Mortality Estimate - Hospital 30-Day		•	Memo
Day Death (Mortalit	y) Rates from Heart	Death	n (Mortality) Rates from Heart	Attack	
Attack					

	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
	Hospital_Outcome_Of_	Care	Hospital Outcome Of Care	30-Day M	Iortality and
	_Measures		Measures		ion Hospital
Description 3	30-Day Mortality and F	Readmi	ission measures hospital-level r	esults	
CSV Revised File Col	lumn Name		.Medicare.gov Column Name		DDB Data Type
Upper Mortality Estim	ate - Hospital 30-	Uppe	r Mortality Estimate - Hospital	30-Day	Memo
Day Death (Mortality)	Rates from Heart	Death	n (Mortality) Rates from Heart	Attack	
Attack					
Number of Patients - H	-		ber of Patients - Hospital 30-Da	-	Memo
Death (Mortality) Rate			tality) Rates from Heart Attack		3.6
Footnote - Hospital 30	•		note - Hospital 30-Day Death (N	Mortality)	Memo
(Mortality) Rates from			from Heart Attack	<u> </u>	3.6
Hospital 30-Day Death from Heart Failure	n (Mortality) Rates	-	ital 30-Day Death (Mortality) F Heart Failure	Kates	Memo
Comparison to U.S. Ra	ate - Hospital 30-Day		parison to U.S. Rate - Hospital	30-Day	Memo
Death (Mortality) Rate		_	(Mortality) Rates from Heart	-	Memo
Lower Mortality Estim			er Mortality Estimate - Hospital		Memo
Day Death (Mortality)	-		n (Mortality) Rates from Heart		TVICINO
Failure (Figure 1)	1.00.1	2 0 0 0 0	1 (2/10/1001) / 1.000 / 1.011 / 1.0010		
Upper Mortality Estim	nate - Hospital 30-	Uppe	r Mortality Estimate - Hospital	30-Day	Memo
Day Death (Mortality)	_		n (Mortality) Rates from Heart	-	
Failure			•		
Number of Patients - H	Hospital 30-Day	Numl	per of Patients - Hospital 30-Da	y Death	Memo
Death (Mortality) Rate	es from Heart Failure	(Mortality) Rates from Heart Failure			
Footnote - Hospital 30	•	Footnote - Hospital 30-Day Death (Mortality)			Memo
(Mortality) Rates from			from Heart Failure		
Hospital 30-Day Death	n (Mortality) Rates	-	ital 30-Day Death (Mortality) F	Rates	Memo
from Pneumonia	11 1 1 20 D	from Pneumonia			2.6
Comparison to U.S. Ra		Comparison to U.S. Rate - Hospital 30-Day			Memo
Death (Mortality) Rate		Death (Mortality) Rates from Pneumonia			Mama
Lower Mortality Estim Day Death (Mortality)	-	Lower Mortality Estimate - Hospital 30-Day Death (Mortality) Rates from Pneumonia			Memo
Pneumonia	Rates Holli	Deau	i (Mortanty) Rates from Fileum	ionia	
Upper Mortality Estim	nate - Hospital 30-	Unne	r Mortality Estimate - Hospital	30-Day	Memo
Day Death (Mortality)	1		n (Mortality) Rates from Pneum	-	14101110
Pneumonia	11000 110111		- (1.201 million) Tunion I form I flouring		
	Number of Patients - Hospital 30-Day		per of Patients - Hospital 30-Da	y Death	Memo
Death (Mortality) Rates from Pneumonia			tality) Rates from Pneumonia		
Footnote - Hospital 30		_	note - Hospital 30-Day Death (N	Mortality)	Memo
(Mortality) Rates from	=		from Pneumonia		
Hospital 30-Day Read	mission Rates from	Hospital 30-Day Readmission Rates from			Memo
Heart Attack			Attack		
Comparison to U.S. Ra	<u> </u>	Comparison to U.S. Rate - Hospital 30-Day		Memo	
Readmission Rates fro	m Heart Attack	Read	mission Rates from Heart Attac	c <u>k</u>	

Table Name	Physical: Revised CSV		Physical:	Business	SS	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Hospital_Outcome_Of_0		Care Hospital Outcome Of Care 3		ortality and	
	_Measures		Measures	Readmissi	ion Hospital	
				Results		
Description	30-Day Mortality and I	Readmi	ission measures hospital-level r	esults		
CSV Revised File C	Column Name	Data	Medicare.gov Column Name		DDB Data Type	
Lower Readmission	Estimate - Hospital	Lowe	r Readmission Estimate - Hosp	oital 30-	Memo	
30-Day Readmission	n Rates from Heart	Day I	Readmission Rates from Heart	Attack		
Attack						
Upper Readmission	Estimate - Hospital 30-	Uppe	r Readmission Estimate - Hosp	ital 30-	Memo	
Day Readmission Ra	ates from Heart Attack	Day I	Readmission Rates from Heart	Attack		
Number of Patients -	- Hospital 30-Day	Numl	per of Patients - Hospital 30-Da	ıy	Memo	
Readmission Rates f	From Heart Attack	Read	mission Rates from Heart Attac	k		
_	30-Day Readmission		ote - Hospital 30-Day Readmis	ssion	Memo	
Rates from Heart At			from Heart Attack			
Hospital 30-Day Rea	admission Rates from	Hosp	ital 30-Day Readmission Rates	from	Memo	
Heart Failure		Heart	Failure			
_	Rate - Hospital 30-Day		parison to U.S. Rate - Hospital	•	Memo	
Readmission Rates f	From Heart Failure	Read	mission Rates from Heart Failu	re		
Lower Readmission			r Readmission Estimate - Hosp		Memo	
30-Day Readmission	n Rates from Heart	Day Readmission Rates from Heart Failure				
Failure						
	Estimate - Hospital 30-	Upper Readmission Estimate - Hospital 30-			Memo	
	ates from Heart Failure	Day Readmission Rates from Heart Failure				
Number of Patients -		Number of Patients - Hospital 30-Day			Memo	
Readmission Rates f			mission Rates from Heart Failu			
	30-Day Readmission	Footnote - Hospital 30-Day Readmission			Memo	
Rates from Heart Fa			from Heart Failure	_		
	admission Rates from	Hospital 30-Day Readmission Rates from			Memo	
Pneumonia			monia			
1	Rate - Hospital 30-Day	Comparison to U.S. Rate - Hospital 30-Day			Memo	
Readmission Rates f		Readmission Rates from Pneumonia				
Lower Readmission	-		er Readmission Estimate - Hosp		Memo	
30-Day Readmission	n Rates from	Day I	Readmission Rates from Pneum	nonia		
Pneumonia	T			1. 1.00	7.6	
	Estimate - Hospital 30-		r Readmission Estimate - Hosp		Memo	
Day Readmission Rates from Pneumonia			Readmission Rates from Pneum		7.6	
Number of Patients -			per of Patients - Hospital 30-Da	-	Memo	
Readmission Rates f			mission Rates from Pneumonia		7.6	
	30-Day Readmission		ote - Hospital 30-Day Readmis	ssion	Memo	
Rates from Pneumor	n1a		from Pneumonia		7.6	
		Locat	10n		Memo	

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital_Outcome_Of_	_Care	Hospital Outcome Of Care	•	Iortality and
	_Measures_State		Measures - State		ion State Results
Description			ission measures state-level resu		
CSV Revised File C	Column Name		.Medicare.gov Column Name	_	DDB Data Type
State		State			Text(2)
	s whose 30-day Death	_	ital 30-Day Death (Mortality) F		Memo
(Mortality) Rates fro			Heart Attack - Better than U.S.	National	
Better than U.S. Nat		Rate			3.6
-	s whose 30-Day Death		ital 30-Day Death (Mortality) F		Memo
I '	om Heart Attack are No		Heart Attack - No different tha	n U.S.	
different than U.S. N			nal Rate		3.6
_	s whose 30-Day Death	_	ital 30-Day Death (Mortality) F		Memo
(Mortality) Rates from Worse than U.S. Nat		Rate	Heart Attack - Worse than U.S	. manonal	
			ital 30-Day Death (Mortality) F	Datas	Memo
(Mortality) Rates fro	s whose 30-Day Death		Heart Attack - Number of Case		Memo
Number of Cases To		Small		S 100	
	s whose 30-Day Death	Hospital 30-Day Death (Mortality) Rates			Memo
(Mortality) Rates fro	•	from Heart Failure - Better than U.S. National			Wichio
Better than U.S. Nat		Rate			
	s whose 30-Day Death		ital 30-Day Death (Mortality) F	Rates	Memo
(Mortality) Rates fro	•	from Heart Failure - No different than U.S.			
No different than U.S.		National Rate			
Number of Hospitals	s whose 30-Day Death	Hospital 30-Day Death (Mortality) Rates			Memo
(Mortality) Rates fro	om Heart Failure are	from	Heart Failure - Worse than U.S		
Worse than U.S. Nat	ional Rate	National Rate			
Number of Hospitals	s whose 30-Day Death	Hosp	ital 30-Day Death (Mortality) F	Rates	Memo
(Mortality) Rates fro		from	Heart Failure - Number of Case	es Too	
Number of Cases To		Small			
_	s whose 30-Day Death		ital 30-Day Death (Mortality) F		Memo
(Mortality) Rates fro			Pneumonia - Better than U.S. N	Vational	
Better than U.S. Nat		Rate	. 100 5 5 7 25 7 25		3.6
_	s whose 30-Day Death	_	ital 30-Day Death (Mortality) F		Memo
• '	om Pneumonia are No	from Pneumonia - No different than U.S.			
different than U.S. N		National Rate			Momo
_	s whose 30-Day Death	Hospital 30-Day Death (Mortality) Rates		Memo	
(Mortality) Rates from Worse than U.S. Nat		from Pneumonia - Worse than U.S. National			
	s whose 30-Day Death	Rate	ital 30-Day Death (Mortality) F	Pates	Memo
(Mortality) Rates fro	•	_	Pneumonia - Number of Cases		MICHIO
Number of Cases To		Small		100	
Trainiber of Cases 10	O Siliuli	Sman	1		

Table Name	Physical: Revised CS	V	Physical:			
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Hospital_Outcome_Of_	_Care			Mortality and	
	_Measures_State		Measures - State		ion State Results	
Description			ssion measures state-level resu		I	
CSV Revised File C			Medicare.gov Column Name		DDB Data Type	
Number of Hospitals	<u> </u>	_	ital 30-Day Readmission Rates		Memo	
	rom Heart Attack are	Heart	Attack - Better than U.S. Nation	onal Rate		
Better than U.S. Nat						
Number of Hospitals	•		ital 30-Day Readmission Rates		Memo	
	rom Heart Attack are		Attack - No different than U.S	. National		
No different than U.		Rate			3.6	
Number of Hospitals	<u> </u>	_	ital 30-Day Readmission Rates		Memo	
	rom Heart Attack are	Heart	Attack - Worse than U.S. National	onal Kate		
Worse than U.S. Nat		TT	1.120 D. D. 1.1.1. D.	C	3.4	
Number of Hospitals	-	_	ital 30-Day Readmission Rates		Memo	
	rom Heart Attack are	Heart	Attack - Number of Cases Too	Small		
Number of Cases To					3.6	
Number of Hospitals	<u> </u>	_	ital 30-Day Readmission Rates		Memo	
	rom Heart Failure are	Heart	Failure - Better than U.S. Nation	onal Rate		
Better than U.S. Nat		TT	: 120 D D 1 : : D :	C	3.6	
Number of Hospitals	•	Hospital 30-Day Readmission Rates from Heart Failure - No different than U.S.			Memo	
	rom Heart Failure are					
No different than U.		National Rate			Mama	
Number of Hospitals	rom Heart Failure are	Hospital 30-Day Readmission Rates from Heart Failure - Worse than U.S. National Rate			Memo	
Worse than U.S. Nat		пеап	ranure - worse man O.S. Nau	onai Kate		
		Цосп	ital 20 Day Pandmission Patas	from	Memo	
Number of Hospitals	rom Heart Failure are	Hospital 30-Day Readmission Rates from Heart Failure - Number of Cases Too Small			Memo	
Number of Cases To		Heart	Tallule - Number of Cases 100) Siliali		
Number of Hospitals		Hosp	ital 30-Day Readmission Rates	from	Memo	
Readmission Rates f	•	Hospital 30-Day Readmission Rates from Pneumonia - Better than U.S. National Rate			IVICIIIO	
Better than U.S. Nat		1 near	moma Better than C.S. Ivation	iai Raic		
Number of Hospitals		Hosp	ital 30-Day Readmission Rates	from	Memo	
_	rom Pneumonia are No	_	monia - No different than U.S.		1.101110	
different than U.S. N		Rate	To different than O.B.	, acronur		
	Number of Hospitals whose 30-Day		Hospital 30-Day Readmission Rates from		Memo	
	Readmission Rates from Pneumonia are		monia - Worse than U.S. Nation			
Worse than U.S. National Rate			· · · · · · · · · · · · · · · · · · ·			
Number of Hospitals		Hosp	ital 30-Day Readmission Rates	from	Memo	
Readmission Rates f	<u> </u>	_	monia - Number of Cases Too S			
Number of Cases To						

Table Name	Physical: Revised CSV	7	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital_Outcome_Of_Care H		Hospital Outcome Of Care	30-Day M	Iortality and
	_Measures_National_A	vera	Measures - National	Readmiss	ion National
	ge		Average	Results	
Description	30-Day Mortality and F	30-Day Mortality and Readmission measures national results			
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
Condition		Cond	Condition		Text(13)
Measure Name Meas		Measure Name		Memo	
National Mortality/R	Readmission Rate	Natio	onal Mortality/Readmission Rat	e	Text(50)

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business		
	Use_Of_Medical_Imag	ging	Use Of Medical Imaging	Outpatien	ent Imaging	
	Measures	<i>, 6</i> –	Measures		Hospital Results	
Description	Outpatient Imaging Eff	iciency	y measures hospital-level result		1	
CSV Revised File C			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		County Name			Text(25)	
Phone Number		Phone Number			Text(10)	
Outpatients with low	back pain who had an	Outpatients with low back pain who had an			Memo	
MRI without trying		MRI without trying recommended treatments				
treatments first such		first, such as physical therapy.				
Number of Patients	1	Number of Patients			Memo	
Footnote 1		Footnote			Memo	
_	asound within 45 days	Outpatients who had a follow-up mammogram or ultrasound within 45 days			Memo	
after a screening man			a screening mammogram.			
Number of Patients 2	2		per of Patients Who Had a Foll	ow-up	Memo	
	Footnote 2		Footnote (2)		Memo	
Outpatient CT scans of the abdomen that were "combination" (double) scans		Outpatient CT scans of the abdomen that were "combination" (double) scans.			Memo	
Number of Patients 3		Number of Patients Who Had Combination Scans			Memo	
Footnote 3		Footnote (3)			Memo	
Outpatient CT scans	of the chest that were	Outpa	atient CT scans of the chest tha	t were	Memo	

Table Name	Physical: Revised CSV I		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File I		Data.Medicare.gov		
	Use_Of_Medical_Imag	ging_	Use Of Medical Imaging	Outpatien	t Imaging
	Measures		Measures	Efficiency	y Hospital Results
Description	Outpatient Imaging Eff	ficienc	y measures hospital-level result	S	
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name		DDB Data Type
"combination" (doub	ole) scans	"com	bination" (double) scans.		
Number of Patients	4	Num	ber of Outpatients Who Had		Memo
		Combination Chest Scans			
Footnote 4		Footnote (4)			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			
Number of Patients 5	5	Num	ber of Patients 5		Memo
Footnote 5		Footr	Footnote (5)		Memo
Outpatients with bra	in CT scans who got a	Outpatients with brain CT scans who got a		got a	Memo
		sinus	CT scan at the same time		
Number of Patients	5	Num	ber of Patients 6		Memo
Footnote 6		Footr	note (6)		Memo

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File		Physical: Data.Medicare.gov	Business		
	Use_Of_Medical_Imag	ging_	Use Of Medical Imaging -	Outpatien	t Imaging	
	Measures_State		State	Efficiency	State Results	
Description	Outpatient Imaging Eff	iciency	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	w back pain who had an	Outpa	atients with low back pain who	had an	Memo	
MRI without trying	recommended	MRI	without trying recommended tr	eatments		
treatments first such as physical therapy		first such as physical therapy.				
Outpatients who had	l a follow-up	Outpatients who had a follow-up			Memo	
mammogram or ultra	asound within 45 days	mammogram or ultrasound within 45 days				
after a screening ma	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.				
Outpatient CT scans	of the chest that were	Outpatient CT scans of the chest that were			Memo	
"combination" (doul	ble) scans	"combination" (double) scans.				
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				
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			

Table Name	Physical: Revised CSV	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Use_Of_Medical_Imaging_ 1		Use Of Medical Imaging -	Outpatien	t Imaging
	Measures_National		National	Efficiency	National Results
Description	Outpatient Imaging Eff	icienc	y measures national results		
CSV Revised File Column Name		Data.Medicare.gov Column Name			DDB Data Type
Measure Name	Measure Name Meas		sure Name		Memo
Score		Score	2		Text(50)

Table Name	Physical: Revised CSV		V Physical: Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital_Process_of_C	Care_	Hospital Process of Care	Process of	f Care—
	Measures_Children_s_	Asth	Measures - Children's	Children's	s Asthma Care
	ma		Asthma	Hospital I	
Description	Process of Care—Chile	dren's .	Asthma Care measures hospita	l-level resul	lts
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	e	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		County Name			Text(25)
Phone Number		Phon	e Number		Text(10)
Percent of Children	Who Received	Percent of Children Who Received Reliever			Memo
Reliever Medication	While Hospitalized	Medication While Hospitalized for Asthma			
for Asthma					
Number of Patients	1	Number of Patients		Memo	
Footnote 1		Footr	note		Memo
Percent of Children	Who Received	Perce	ent of Children Who Received	Systemic	Memo
Systemic Corticoster	roid Medication While	Corticosteroid Medication While Hospitalized			
Hospitalized for Ast			sthma		
Number of Patients 2	2	Numl	ber of Patients-2		Memo
Footnote 2		Footr			Memo
	Percent of Children and their Caregivers		Percent of Children and their Caregivers Who		Memo
Who Received a Home Management Plan		Received a Home Management Plan of Care			
of Care Document While Hospitalized for		Document While Hospitalized for Asthma			
Asthma					
Number of Patients 3	3	Num	ber of Patients-3		Memo
Footnote 3		Footr	note-3		Memo

Table Name	Physical: Revised CS	V	Physical:	Business	
(Back to Table Listing)	Flat File	~	Data.Medicare.gov	D	
	Hospital_Process_Of_0		Hospital Process of Care	f Care—Heart	
D 1.41	Measures_Heart_Attac		Measures - Heart Attack	ospital Results	
Description			k 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			Memo
Address 3		Addr	ess 3		Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP (Text(5)
County Name			ty Name		Text(25)
Phone Number			e Number		Text(10)
Percent of Heart Att	ack Patients Given	Perce	ent of Heart Attack Patients Giv	ren	Memo
Aspirin at Discharge			rin at Discharge		
Number of Patients	2	Numl	ber of Patients-2		Memo
Footnote 2		Footr	note-2		Memo
Percent of Heart Att	ack Patients Given	Percent of Heart Attack Patients Given			Memo
Fibrinolytic Medicat	tion Within 30 Minutes	Fibrinolytic Medication Within 30 Minutes			
Of Arrival		Of A	rrival		
Number of Patients	6	Numl	ber of Patients-6		Memo
Footnote 6		Footnote-6			Memo
Percent of Heart Att	ack Patients Given PCI	Percent of Heart Attack Patients Given PCI			Memo
Within 90 Minutes (Of Arrival	Within 90 Minutes Of Arrival			
Number of Patients	7	Number of Patients-7			Memo
Footnote 7		Footnote-7			Memo
Average number of	minutes before	Average number of minutes before			Memo
outpatients with che	st pain or possible heart				
attack got an ECG		attack	got an ECG		
Number of Patients	8	Numl	ber of Patients 8		Memo
Footnote 8		Footr	note 8		Memo
Average number of	minutes before	Avera	age number of minutes before		Memo
outpatients with che	st pain or possible heart	outpa	tients with chest pain or possib	le heart	
attack were transferred to another hospital		attacl	were transferred to another ho	spital	
Number of Patients	9	Num	ber of Patients 9		Memo
Footnote 9		Footr	note 9		Memo
Outpatients with chest pain or possible		Outpa	atients with chest pain or possil	ole heart	Memo
heart attack who got	aspirin within 24	attack who got aspirin within 24 hours of			
hours of arrival		arriva	al		
Number of Patients	11	Num	ber of Patients-11		Memo
Footnote 11		Footr	note-11		Memo

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital_Process_Of_0	Care_	Hospital Process of Care	Process of	f Care—Heart
	Measures_Heart_Attac	k	Measures - 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
Outpatients with che	est pain or possible	Outpa	atients with chest pain or possib	ole heart	Memo
heart attack who got	drugs to break up	attack	k who got drugs to break up blo	od clots	
blood clots within 30) minutes of arrival	within 30 minutes of arrival			
Number of Patients	12	Number of Patients-12			Memo
Footnote 12		Footnote-12			Memo
Heart Attack Patient	s Given a Prescription	Heart Attack Patients Given a Prescription for			Memo
for a Statin at Discha	arge	a Stat	tin at Discharge		
Number of Patients	13	Number of Patients-13		Memo	
Footnote 13		Footnote-13			Memo
Median Time to Fibrinolysis M		Medi	an Time to Fibrinolysis	Memo	
Number of Patients	10	Number of Patients 10			Memo
Footnote 10		Footr	note 10		Memo

Table Name (Back to Table Listing)	Physical: Revised CS' Flat File	V	Physical: Data.Medicare.gov	Business		
(Buck to Tubic Eisting)	Hospital_Process_Of_0	Care			Process of Care—Heart	
	Measures_Heart_Failu		Measures - Heart Failure		ospital Results	
Description			re measures hospital-level resul		ospitai Kesuits	
CSV Revised File C			.Medicare.gov Column Name		DDB Data Type	
Provider Number	Joiumm Name		der Number		Memo	
Hospital Name			ital Name		Memo	
Address 1		Addr			Memo	
Address 2		Addr			Memo	
Address 3		Addr	ess 3		Memo	
City		City			Memo	
State		State			Text(2)	
ZIP Code		ZIPC	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			Memo	
Evaluation of Left V	entricular Systolic	evaluation of Left Ventricular Systolic				
(LVS) Function	•	Dysfunction (LVSD)				
Number of Patients	1	Numl	ber of Patients		Memo	
Footnote 1		Footn	note		Memo	
Percent of Heart Fail	lure Patients Given	Percent of Heart Failure Patients Given ACE		Memo		
ACE Inhibitor or ARB for Left Ventricular		Inhibitor or ARB for Left Ventricular Systolic				
Systolic Dysfunction (LVSD)			unction (LVSD)	•		
Number of Patients 2			ber of Patients-2		Memo	
Footnote 2		Footn	note-2		Memo	

Table Name	Physical: Revised CS	V	Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital_Process_Of_Care_		Hospital Process of Care	Process of Care—Heart	
	Measures_Heart_Failure		Measures - Heart Failure	Failure Hospital Results	
Description	Process of Care—Heart Failure measures hospital-level results				
CSV Revised File C	Column Name	Data.Medicare.gov Column Name			DDB Data Type
Percent of Heart Fail	lure Patients Given	Percent of Heart Failure Patients Given		ven	Memo
Discharge Instruction	ns	Disch	Discharge Instructions		
Number of Patients 3	Number of Patients 3 Numb		ber of Patients-3		Memo
Footnote 3		Footr	note-3		Memo

Table Name (Back to Table Listing)	Physical: Revised CS' Flat File	V	Physical: Data.Medicare.gov	Business	
	Hospital_Process_Of_0	Care	Hospital Process of Care	Process of Car	e—
	Measures_Pneumonia	_	Measures - Pneumonia	Pneumonia Ho	spital Results
Description		monia	measures hospital-level results		
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	DD	B Data Type
Provider Number		Provi	der Number	Me	mo
Hospital Name		Hosp	ital Name	Me	mo
Address 1		Addr	ess 1	Me	mo
Address 2		Addr	ess 2	Me	mo
Address 3		Addr	ess 3	Me	mo
City		City		Me	mo
State		State		Tex	t(2)
ZIP Code		ZIP (Code	Tex	t(5)
County Name		Coun	ty Name	Tex	t(25)
Phone Number		Phon	e Number	Tex	t(10)
Percent of Pneumon				Me	mo
Initial ER Blood Cul	Iture Was Performed	Perce	ent of Pneumonia Patients Whos	se Initial	
Prior To Administra	tion Of First Dose Of	ER B	lood Culture Was Performed P	rior To	
Antibiotics		Adm	inistration Of First Dose Of An	ibiotics	
Number of Patients 2	2	Num	ber of Patients 2	Me	mo
Footnote 2		Footr	note 2	Me	mo
Percent of Pneumon	ia Patients Given the	Perce	ent of Pneumonia Patients Giver	n the Me	mo
Most Appropriate In	itial Antibiotic(s)	Most	Appropriate Initial Antibiotic(s	5)	
Number of Patients	4	Num	ber of Patients 4	Me	mo
Footnote 4		Footr	note 4	Me	mo

Table Name (Back to Table Listing)	Physical: Revised CS' Flat File	V	Physical: Data.Medicare.gov	Business	
(<u>Back to Table Eisting</u>)		Toro	Hospital Process of Care	Drogge of	f Cora Surgical
	Hospital_Process_of_C Measures_Surgical_Ca		Measures - Surgical Care		f Care—Surgical covernent Project
	mprovement_Project		Improvement Project	Hospital I	5
Description		ical Ca	re Improvement Project measu:		
			.Medicare.gov Column Name		
CSV Revised File C Provider Number	Joiumin Name		der Number		DDB Data Type
					Memo
Hospital Name			ital Name		Memo
Address 1		Addr			Memo
Address 2		Addr			Memo
Address 3		Addr	ess 3		Memo
City		City			Memo
State		State			Text(2)
ZIP Code		ZIP (Text(5)
County Name			ty Name		Text(25)
Phone Number		Phon	e Number		Text(10)
Surgery patients who	o were given an	Perce	ent of Surgery Patients given an	antibiotic	Memo
antibiotic at the right	t time (within one hour	at the	right time (within one hour bet	fore	
before surgery) to he	elp prevent infection	surge	ry) to help prevent infection		
Number of Patients	1	Num	ber of Patients-1		Memo
Footnote 1		Footr	note-1		Memo
Surgery patients who	ose preventive	Percent of Surgery Patients whose preventive			Memo
	ped at the right time	antibiotics were stopped at the right time			
(within 24 hours afte		(within 24 hours after surgery)			
Number of Patients 2		Number of Patients-2			Memo
Footnote 2		Footr	note-2		Memo
	were given the right	Perce	ent of Surgery Patients who wer	e given	Memo
	help prevent infection	the right kind of antibiotic to help prevent			
	1 1	infec	~		
Number of Patients 3	3	Num	ber of Patients-3		Memo
Footnote 3	-		note-3		Memo
	atment at the right time		ent of Surgery Patients who got	treatment	Memo
(within 24 hours before	_		ht time (within 24 hours before		
surgery) to help prev		_	ry) to help prevent blood clot		
Number of Patients			ber of Patients-4		Memo
Footnote 4			note-4		Memo
Surgery patients who	ose doctors ordered		ent of Surgery Patients whose do	octors	Memo
treatments to preven		ordered treatments to prevent blood clots after			1,101110
certain types of surg		certain types of surgeries			
Number of Patients			ber of Patients-5		Memo
Footnote 5	<i>,</i>		note-5		Memo
1 oomote 3		1 000			MICHIO

Table Name	Physical: Revised CS	V	Physical:	Business	
(Back to Table Listing)	Flat File		Data.Medicare.gov		
	Hospital_Process_of_Ca		Hospital Process of Care	Process o	f Care—Surgical
	Measures_Surgical_Ca	re_I	Measures - Surgical Care	Care Imp	rovement Project
	mprovement_Project		Improvement Project	Hospital l	Results
Description	Process of Care—Surg	ical Ca	re Improvement Project measu	res hospita	l-level results
CSV Revised File C	Column Name	Data	.Medicare.gov Column Name	;	DDB Data Type
Heart surgery patient	ts whose blood sugar	Perce	ent of all Heart Surgery Patients	whose	Memo
	ept under good control		l sugar is kept under good contr	rol in the	
in the days right after	<u> </u>		right after surgery		
Number of Patients 6	<u> </u>	Numl	ber of Patients-6		Memo
Footnote 6			note-6		Memo
The percent of surge			ent of Surgery Patients whose u		Memo
	re removed on the first		ters were removed on the first of	or second	
or second day after s	<u> </u>		fter surgery		
Number of Patients 1	11	Num	ber of Patients 11		Memo
Footnote 11			note 11		Memo
Surgery patients who		Surgery patients who were taking heart drugs			Memo
	ckers before coming to	called beta blockers before coming to the			
the hospital who wer		_	tal who were kept on them		
Number of Patients 8	3	Number of Patients 8			Memo
Footnote 8		Footr			Memo
Outpatients having s			atients having surgery who got		Memo
antibiotic at the right		antibiotic at the right time - within one hour			
hour before surgery	(higher numbers are	befor	e surgery (higher numbers are	better)	
better)					
Number of Patients 9)		ber of Patients 9		Memo
Footnote 9		Footr			Memo
Outpatients having s		Outpatients having surgery who got the right		Memo	
	ic (higher numbers are	kind	of antibiotic (higher numbers a	re better)	
better)	10	> 7 .	(D): 10		3.6
Number of Patients 1	10		ber of Patients 10		Memo
	Footnote 10		note 10	1	Memo
Patients having surgery who were actively		Patients having surgery who were actively			Memo
warmed in the operating room or whose		warmed in the operating room or whose body			
body temperature wa		temperature was near normal			24
Number of Patients	13	Number of Patients 13			Memo
Footnote 13		Footr	note 13		Memo

Table Name	Physical: Revised CSV		Physical: Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital_Process_of_C	Care_	Hospital Process of Care	Process of	f Care State
	Measures_State_Avera	_	Measures - State Average	Results	
Description	Process of Care measur			_	_
CSV Revised File C	Column Name	Data.	Medicare.gov Column Nam	e	DDB Data Type
State		State			Text(2)
Percent of Heart Atta			nt of Heart Attack Patients Gi	ven	Memo
Aspirin at Discharge			in at Discharge		
Percent of Heart Atta			nt of Heart Attack Patients Gi		Memo
_	ion Within 30 Minutes		nolytic Medication Within 30	Minutes	
Of Arrival		Of A			
	ack Patients Given PCI		nt of Heart Attack Patients Gi	ven PCI	Memo
Within 90 Minutes C			n 90 Minutes Of Arrival		
	lure Patients Given an		nt of Heart Failure Patients G		Memo
Evaluation of Left V	entricular Systolic		nation of Left Ventricular Syst	olic (LVS)	
(LVS) Function		Funct		, , ,	2.6
Percent of Heart Fail			nt of Heart Failure Patients G		Memo
	RB for Left Ventricular		itor or ARB for Left Ventricul	ar Systolic	
Systolic Dysfunction	,	•	inction (LVSD)	2.6	
	Percent of Heart Failure Patients Given		nt of Heart Failure Patients G	Memo	
Discharge Instruction		Discharge Instructions Percent of Pneumonia Patients Whose Initial			Mana
Percent of Pneumon					Memo
Initial ER Blood Cul	tion Of First Dose Of	ER Blood Culture Was Performed Prior To Administration Of First Dose Of Antibiotics			
Antibiotics	tion of First Dose of	Adiiii	illistration Of First Dose Of Al		
Percent of Pneumon	io Potionte Given the	Percent of Pneumonia Patients Given the			Memo
Most Appropriate In					Memo
Surgery patients who		Most Appropriate Initial Antibiotic(s) Surgery patients who were given an antibiotic			Memo
	t time (within one hour	at the right time (within one hour before			Wichio
before surgery) to he	•	surgery) to help prevent infection			
Surgery patients who	* *		ery patients whose preventive	antibiotics	Memo
antibiotics were stop	•	were stopped at the right time (within 24			1,161110
(within 24 hours after			after surgery)	<u>-</u> -	
	were given the right		ery patients who were given th	e right	Memo
	help prevent infection	_	of antibiotic to help prevent in	•	
	atment at the right time		nts who got treatment at the rig		Memo
(within 24 hours before			in 24 hours before or after the		
surgery) to help prev			p prevent blood clots	- ·	
Surgery patients who			ery patients whose doctors ord	ered	Memo
treatments to preven		_	nents to prevent blood clots af		
certain types of surge	eries	types of surgeries			
	ts whose blood sugar		surgery patients whose blood		Memo
(blood glucose) is ke	ept under good control		d glucose) is kept under good	control in	
in the days right afte	r surgery	the da	ays right after surgery		

Table Name	Physical: Revised CSV		Physical:		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	Hospital_Process_of_C		= 1		f Care State
	Measures_State_Avera		Measures - State Average	Results	
Description	Process of Care measur				
CSV Revised File C			Medicare.gov Column Name		DDB Data Type
The percent of surge			ercent of surgery patients whose		Memo
<u> </u>	re removed on the first		ters were removed on the first of	or second	
or second day after s			fter surgery		3.6
Surgery patients who	_		ry patients who were taking he		Memo
	ckers before coming to		beta blockers before coming to	o tne	
the hospital, who we Percent of Children			tal who were kept on them nt of Children Who Received F	Poliovor	Memo
Reliever Medication			cation While Hospitalized for A		Memo
for Asthma	winic Hospitanized	Wicuit	cation while Hospitalized for A	istiiiia	
Percent of Children	Who Received	Perce	nt of Children Who Received S	Systemic	Memo
	oid Medication While		costeroid Medication While Ho	•	TVICINO
Hospitalized for Astl			sthma	~F	
Percent of Children		Perce	nt of Children and their Caregi	vers Who	Memo
	me Management Plan		ved a Home Management Plan		
of Care Document W	While Hospitalized for	Docu	ment While Hospitalized for A	sthma	
Asthma					
Outpatients having s		Outpa	atients having surgery who got	an	Memo
	t time - within one hour	antibiotic at the right time - within one hour			
	er numbers are better)	before surgery (higher numbers are better)			
Outpatients having s		Outpatients having surgery who got the right			Memo
•	ic (higher numbers are	kind (of antibiotic (higher numbers an	e better)	
better)		1 6 4 1 6			Memo
Average number of i	st pain or possible heart	Average number of minutes before outpatients with chest pain or possible heart			Memo
attack got an ECG	st pain of possible heart	_	got an ECG	ic iicart	
Average number of n	ninutes before		age number of minutes before		Memo
0	st pain or possible heart		tients with chest pain or possib	le heart	TVICINO
*	ed to another hospital		were transferred to another ho		
Median Time to Fibr			an Time to Fibrinolysis	•	Memo
Outpatients with che			atients with chest pain or possib	ole heart	Memo
heart attack who got	aspirin within 24	attack	who got aspirin within 24 hou	rs of	
hours of arrival		arriva			
Outpatients with che		_	atients with chest pain or possib		Memo
heart attack who got			who got drugs to break up blo	od clots	
blood clots within 30			n 30 minutes of arrival		3.5
	s Given a Prescription		Attack Patients Given a Prescr	ription for	Memo
for a Statin at Discha			in at Discharge	, 1	3.4
	ery who were actively		nts having surgery who were ac		Memo
warmed in the operation	•		ed in the operating room or wh	ose doay	
body temperature was near normal			erature was near normal		

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
	Hospital_Process_of_Care_ Measures_National_Averag 1		Hospital Process of Care Measures - National Average	Process of Care National Results	
Description	Process of Care measures national results				
CSV Revised File C	Column Name	Data	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 (Back to Table Listing)	· ·		Physical:	Business
(Back to Table Listing)	Flat File		Data.Medicare.gov	
	Hospital_Readmission	_Red	Hospital Readmission	Readmission Reduction
	uction		Reduction	Hospital 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	ider Number	Memo
State		State		Text(2)
Measure Name		Meas	sure Name	Memo
Number of Discharg	ges	Num	ber of Discharges	Memo
Footnote		Footi	note	Memo
Excess Readmission	Ratio	Exce	ss Readmission Ratio	Memo
Predicted Readmissi	on Rate	Predi	cted Readmission Rate	Memo
Expected Readmissi	on Rate	Expe	cted Readmission Rate	Memo
Number of Readmissions Num		ber of Readmissions	Memo	
Start Date		Start	Date	Memo
End Date		End l	Date	Memo

Table Name	Physical: Revised CSV		Physical:	Business		
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov			
	Hospital_Structural_M	easur	Hospital Structural	Structural	Hospital Results	
	es_Cardiac_Surgery_R	egistr	Measures - Cardiac Surgery			
	у		Registry			
Description	Structural measures hospital-level results					
CSV Revised File C	Column Name	Data.Medicare.gov Column Name			DDB Data Type	
Provider Number		Provider Number			Memo	
Hospital Name		Hosp	Hospital Name		Memo	
Address 1		Addr	Address 1		Memo	
Address 2	Addı		Address 2		Memo	
Address 3		Addr	ess 3		Memo	
City		City			Memo	

Table Name	Physical: Revised CSV		Physical:	Business			
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov				
	Hospital_Structural_Me	easur	Hospital Structural	Structural	Hospital Results		
	es_Cardiac_Surgery_Registr		Measures - Cardiac Surgery				
	y		Registry				
Description	Structural measures hos	Structural measures hospital-level results					
CSV Revised File Column Name			.Medicare.gov Column Name		DDB Data Type		
State		State			Text(2)		
ZIP Code		ZIPC	ZIP Code		Text(5)		
County Name		Coun	County Name		Text(25)		
Phone Number		Phone	e Number		Text(10)		
Measure Name		Meas	ure Name		Memo		
Measure Response		Meas	ure Response		Memo		

Table Name (Back to Table Listing)	Physical: Revised CSV Flat File	V	Physical: Data.Medicare.gov	Business	
	Hospital_Compare_CASPE		Hospital Compare - CASPER/ASPEN Contacts	Hospital Compare - CASPER/ASEN Contacts	
Description	Hospital Compare measure crosswalk				
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	ddress E-ma		il Address		Memo
Phone		Phon	e		Memo

Table Name			Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	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	der Number	Memo	
State		State			Memo
Period		Perio	Period		Memo
Claim Type		Claim Type			Memo
Avg Spending Per E	pisode (Hospital)	Avg	Avg Spending Per Episode (Hospital)		Memo
Avg Spending Per E	pisode (State)	Avg Spending Per Episode (State)		Memo	
Avg Spending Per E	pisode (Nation)	Avg	Avg Spending Per Episode (Nation)		Memo
Percent of Spending (Hospital) Perc		Perce	Percent of Spending (Hospital)		Memo
Percent of Spending	(State)	Percent of Spending (State)			Memo
Percent of Spending	(Nation)	Perce	Percent of Spending (Nation)		Memo

Table Name	Physical: Revised CSV		Physical:	Business	
(<u>Back to Table Listing</u>)	Flat File		Data.Medicare.gov		
	American_College_of_Card		American College of	American	College of
	iology_Percutaneous_Coron		Cardiology Percutaneous	Cardiolog	y Percutaneous
	ary_Intervention_PCI_Read		Coronary Intervention (PCI)	Coronary	Intervention (PCI)
	mission_Measure		Readmission Measure	Readmiss	ion Measure
Description	American College of Cardiology Percutaneous Coronary Intervention (PCI) Readmission				
	Measure				
CSV Revised File Column Name		Data	.Medicare.gov Column Name		DDB Data Type
MPN		MPN			Memo

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

Timely and Effective Care Acute Myocardial Infarction

Measure ID	Measure Description
AMI-2	Heart Attack Patients Given Aspirin at Discharge
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-10	Heart Attack Patients Given a Prescription for a Statin at Discharge
OP-1	Median Time to Fibrinolysis
OP-2	Outpatients with chest pain or possible heart attack who got drugs to break up blood
	clots within 30 minutes of arrival
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-4	Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of
	arrival
OP-5	Average number of minutes before outpatients with chest pain or possible heart attack
	got an ECG

Heart Failure

Measure ID	Measure Description
HF-1	Patients Given Discharge Instructions
HF-2	Patients Given An Evaluation of Left Ventricular Systolic (LVS) Function
HF-3	Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)

Pneumonia

Measure ID	Measure Description	
PN-3b	Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to the	
	Administration of the First Hospital Dose of Antibiotics	
PN-6	Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	

Children's Asthma Care

Measure ID	Measure Description
CAC-1a	Percent of Children Who Received Reliever Medication While Hospitalized for
	Asthma
CAC-2a	Percent of Children Who Received Systemic Corticosteroid Medication (oral and IV
	Medication That Reduces Inflammation and Controls Symptoms) While Hospitalized
	for Asthma
CAC-3	Percent of Children and their Caregivers Who Received a Home Management plan of
	Care Document While Hospitalized for Asthma

Surgical Care Improvement

Measure ID	Measure Description	
SCIP-Inf-1a	Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision	
SCIP-Inf-2a	Percent of Surgery Patients who Received the Appropriate Preventative Antibiotic(s)	
	for Their Surgery	
SCIP-Inf-3a	Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After	
	Surgery	
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 catheter was removed on the first or second day after	
	surgery.	
SCIP-Inf-10	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 (Venous	
	Thromboembolism) For Certain Types of Surgeries	
SCIP-VTE-2	Surgery Patients Who Received Treatment To Prevent Blood Clots Within 24 Hours	
	Before or after Selected Surgeries to Prevent Blood Clots	
SCIP-Card-2	Percent of 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	
OP-6	Outpatients having surgery who got an antibiotic at the right time – within one hour	
	before surgery	
OP-7	Outpatients having surgery who got the right kind of antibiotic	

Emergency Department

Efficiency Depar	
Measure ID	Measure Description
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
OP-18b	Average time patients spent in the emergency department before being sent home
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
OP-22	Percentage of patients who came to the emergency department with stroke symptoms
	who received brain scan results within 45 minutes of arrival.
OP-23	Percentage of patients who came to the emergency department with stroke symptoms
	who received brain scan results within 45 minutes of arrival

Preventative Care

Measure ID	Measure Description	
IMM-1a	Pneumococcal Immunization	
IMM-2	Influenza Immunization	

Readmissions, Complications, and Deaths

30–Day Mortality and Readmissions

Measure ID	Measure Description
MORT-30-AMI	Acute Myocardial Infarction 30–Day Mortality Rate
MORT-30-HF	Heart Failure 30–Day Mortality Rate
MORT-30-PN	Pneumonia 30–Day Mortality Rate
READM-30-AMI	Acute Myocardial Infarction 30–Day Readmission Rate
READM-30-HF	Heart Failure 30–Day Readmission Rate
READM-30-PN	Pneumonia 30–Day Readmission Rate
Hip/ Knee	30-day readmission rate following elective primary total hip arthroplasty (THA) and/or
Readmission	total knee arthroplasty (TKA)
HWR	30-day hospital-wide all- cause unplanned readmission
Hip/Knee	Hospital level risk-standardized complication rate (RSCR) following elective primary
Complications	total hip arthoplasty (THA) and total knee arthroplasty (TKA)

AHRQ Patient Safety Indicators (PSIs)

Measure ID	Measure Description	
PSI-04	Death Among Surgical Patients with Serious, Treatable Complications	
PSI-06	Iatrogenic Pneumothorax	
PSI-12	Post–Operative Pulmonary Embolism (PE) or Deep Vein Thrombosis (DVT)	
PSI-14	Postoperative Wound Dehiscence	
PSI-15	Accidental Puncture or Laceration	
PSI-90	Complication/Patient Safety for Selected Indicators	

Healthcare-Associated Infections (HAIs)

Measure ID	Measure Description
HAI-1	Central-line associated bloodstream infection (CLABSI)
HAI-2	Catheter-associated urinary tract infection (CAUTI)
HAI-3	Surgical site infections from colon surgery (SSI: Colon)
HAI-4	Surgical site infections from abdominal hysterectomy (SSI: Hysterectomy)

Structural Measures

Measure ID	Measure Description
SM_PART_CARD	Participation in a systematic database for cardiac surgery
SM_PART_STROKE	Participation in a systematic database for stroke care
SM_PART_NURSE	Participation in a systematic database for nursing sensitive care
ACS_REGISTRY	Participation in a multispecialty surgical registry
OP-12	The ability for providers with HIT to receive laboratory data electronically directly into
	their qualified/certified EHR system as discrete searchable data
OP-17	Tracking clinical results between visits

Number of Medicare Patients and Medicare Payment

Measure Description	
Number of Medicare patient discharges for selected MS–DRGs	
Spending per hospital patient with Medicare: Medicare spending per beneficiary	

Outpatient Imaging Efficiency

Measure ID	Measure Description
OP-8	Outpatients with low back pain who had an MRI without trying recommended treatments first, such as physical therapy. (If a number is high, it may mean the facility
	is doing too many unnecessary MRIs for low back pain.)
OP-9	Outpatients who had a follow–up mammogram or ultrasound within 45 days after a screening mammogram. (A number that is much lower than 8% may mean there's not enough follow–up. A number much higher than 14% may mean there's too much unnecessary follow–up.)
OP-10	Outpatient CT scans of the abdomen that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)
OP-11	Outpatient CT scans of the chest that were "combination" (double) scans. (The range for this measure is 0 to 1. A number very close to 1 may mean that too many patients are being given a double scan when a single scan is all they need.)
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.

Hospital Readmissions Reduction Program

Measure Description
Acute Myocardial Infarction 30–Day Readmission Rate
Heart Failure 30–Day Readmission Rate
Pneumonia 30–Day Readmission Rate

Hospital Value-Based Purchasing

1105pital value Based I di chashig
Measure Description
HVBP Acute Myocardial Infarction Score
HVBP Healthcare Associated Infection Score
HVBP HCAHPS Score
HVBP Heart Failure Score
HVBP Pneumonia Score
HVBP Surgical Care Improvement Project Score
HVBP Clinical Process of Care Domain Score
HVBP Patient Experience of Care Domain
HVBP Total Performance Score

Hospital-Acquired Conditions (HACs)

-n <u>r</u> -n - <u>r</u>	
Measure ID	Measure Description
HAC-1	Foreign Object Retained After Surgery
HAC-2	Air Embolism
HAC-3	Blood Incompatibility
HAC-4	Pressure Ulcer Stages III & IV
HAC-5	Falls and trauma (Includes Fracture, dislocation, intracranial injury, crushing injury,
	burn, other injuries)
HAC-6	Vascular catheter–associated infections
HAC-7	Catheter-associated urinary tract Infection (CAUTI)
HAC-8	Manifestations of Poor Glycemic Control

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)

#	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?

Appendix C – Footnote 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:

ID	Footnote Text
a	Source: Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey.
b	This is the middle range of payments for the most typical cases treated in this geographic area for this
	condition or procedure.
c	Number of Medicare Patients Treated: The number of discharges the hospital treated for each MS-
	DRG for the current data collection period. The United States and state average of Medicare Patients
a	does not include hospitals with zero cases. The payment and volume information is for acute care hospitals. Critical Access Hospitals (CAH) are
d	not included because they are paid using another method.
e	Payment cannot be computed as there were no Medicare discharges for this MS-DRG for the current
	data collection period.
f	An asterisk (*) appears in the table where data cannot be disclosed to protect personal health
	information due to the small number of Medicare patients (fewer than 11).
g	This hospital is currently not submitting data for Hospital Process of Care, Hospital Outcome of Care
	Measures and/or the Hospital Consumer Assessment of Health Providers and Systems (HCAHPS)
	Patient Survey.
h	This column shows the number of patients with Original Medicare who were admitted to the hospital
	for heart attack, heart failure or pneumonia conditions. The hospital may also have treated additional
	Medicare patients in Medicare health plans (like an HMO or PPO).
i	The number of cases is too small (fewer than 25) to reliably tell how well the hospital is performing.
j	Medicare requires hospitals to have at least 25 qualifying cases to have their results reported. This
1	hospital had less than 25 cases.
1	The number of cases is too small to reliably tell how well a hospital is performing.
	For each measure, the rate is the percent of patients for whom the treatment is appropriate. Where
	these numbers are small (fewer than 25 patients), the calculated rate may not accurately predict the
	hospital's future performance. As the quality data base is expanded to a full rolling four quarters of
	data for each measure, the number of cases used to determine hospitals' rates will likely increase,
	thereby increasing the reliability and stability of the rates. Note: This footnote does not necessarily
	reflect hospital size or overall patient volume.
2	The hospital indicated that the data submitted for this measure were based on a sample of cases.
	A rate may be based upon the total number of cases treated by a hospital, or for a facility with a large
	caseload, a rate may be based on a random sample of the cases the hospital treated. This footnote
	indicates that a hospital chose to submit data for a sample of its total cases (following specific rules
	for how to the select the cases).

ID	Footnote Text
3	Data were collected during a shorter time period (fewer quarters) than the maximum possible time
	for this measure.
	Each rate reflects the care given over a specific time period, up to a maximum of four quarters during
	a 12 month period. The number of quarters of data available is determined by when hospitals first
	began to report data using a specific measure. This footnote indicates that the hospital's rate was
	based on data from fewer than the maximum possible number of quarters that the measure was
	generally collected.
4	Suppressed for one or more quarters by CMS.
	Hagnitals are required to submit accounts remarkable data to the Contous for Medicare and Medicard
	Hospitals are required to submit accurate, reportable data to the Centers for Medicare and Medicaid
	Services (CMS). The rates for these measures were calculated by excluding data that had been suppressed for one or more quarters because they were identified as inaccurate.
5	No data are available from the hospital for this measure.
	To and are available from the hospital for this measure.
	Hospitals volunteer to provide data for reporting on Hospital Compare. This footnote is applied when
	the hospital did not submit any cases for a measure.
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.
	The number of completed surveys the hospital or its vendor provided to CMS is less than 100.
7	Survey results are based on less than 12 months of data.
8	This footnote is applied when HCAHPS results are based on less than 12 months of survey data. Survey results are not available for this reporting period.
O	Survey results are not available for this reporting period.
	This footnote is applied when a hospital did not participate in HCAHPS, did not collect sufficient
	HCAHPS data for public reporting purposes, or chose to suppress their HCAHPS results.
9	No or very few patients were eligible for the HCAHPS Survey.
	This footnote is applied when a hospital has no patients eligible to participate in the HCAHPS survey.
10	A state average was not calculated because too few hospitals in the state submitted data.
11	This footnote is applied when too few hospitals submitted data.
11	There were discrepancies in the data collection process.
	This footnote is applied when there have been deviations from HCAHPS data collection protocols.
	CMS is working with survey vendors and/or hospitals to correct this situation.
12	Very few patients were eligible for the HCAHPS survey. The scores shown reflect fewer than 50
12	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.

ID	Footnote Text
13	These measures are included in the composite measure calculations but Medicare is not reporting
	them at this time.
14	No data are available for publication from the hospital for this measure because there were zero
	central line days.
15	No data are available for publication from the hospital for this measure because this hospital does
	not have ICU locations.
16	The number of cases is too small (fewer than 10) to reliably tell how well the hospital is performing.
17	No data are available from the hospital for this measure.
18	Number of cases is too small (fewer than 25) to report and excess readmission ratio.
19	The hospital is not included in the Hospital Readmissions Reduction Program.
20	Data aren't available for this reporting as the hospital is a new member of the surgical registry and
	didn't have an opportunity to submit any cases for the measure.
21	Data aren't available for the voluntary public reporting of this measure.
†	"0 patients" The notation "0 patients" is applied when no patients met the criteria for inclusion in that
	particular measure's calculation.