

2014-2021 Medicare FFS Geographic Variation by Hospital Referral Region Data Dictionary

Term Name	Variable Name	Definition
Year	YEAR	Year
Geographic Level	BENE_GEO_LVL	National or HRR
HRR	BENE_GEO_DESC	Name of HRR
HRR Number	BENE_GEO_CD	HRR Number
Age Level	BENE_AGE_LVL	All Beneficiaries, Beneficiaries under 65, or Beneficiaries 65 or older
Beneficiaries with Part A and Part B	BENES_WTH_PTAPTB_CNT	Count of Medicare beneficiaries who had both Part A and Part B coverage for all Medicare entitled months. New enrollees and beneficiaries that died during the year are included.
FFS Beneficiaries	BENES_FFS_CNT	Count of Medicare beneficiaries who were enrolled in Part A and Part B, as well as fee-for-service (FFS) coverage for all Medicare entitled months. New enrollees and beneficiaries that died during the year are included.
MA Beneficiaries	BENES_EVER_MA_CNT	Count of beneficiaries who were ever enrolled in a Medicare Advantage (MA) program. New enrollees and beneficiaries that died during the year are included.
MA Participation Rate	EVER_MA_PRTCPTN_RATE	Percentage of beneficiaries who were ever enrolled in a Medicare Advantage (MA) program. New enrollees and beneficiaries that died during the year are included.
Average Age	BENE_AVG_AGE	Average age of Medicare Fee-for-Service beneficiaries.
Percent Female	BENE_FEML_PCT	Percentage of Medicare Fee-for-Service beneficiaries who are female.
Percent Male	BENE_MALE_PCT	Percentage of Medicare Fee-for-Service beneficiaries who are male.
Percent Non-Hispanic White	BENE_RACE_WHT_PCT	Percentage of Medicare Fee-for-Service beneficiaries who are Non-Hispanic White.
Percent African American	BENE_RACE_BLACK_PCT	Percentage of Medicare Fee-for-Service beneficiaries who are African American.
Percent Hispanic	BENE_RACE_HSPNC_PCT	Percentage of Medicare Fee-for-Service beneficiaries who are Hispanic.
Percent Other/Unknown	BENE_RACE_OTHR_PCT	Percentage of Medicare Fee-for-Service beneficiaries whose race/ethnicity is other or unknown.
Percent Eligible for Medicaid*	BENE_DUAL_PCT	Percentage of Medicare Fee-for-Service beneficiaries who are eligible for Medicaid for at least one month in the year.
Average HCC Score	BENE_AVG_RISK_SCORE	Average Hierarchical Condition Category (HCC) Score.
Total Actual Medicare Payment	TOT_MDCR_PYMT_AMT	Total actual Medicare payment for beneficiaries who had both Part A and Part B as well as fee-for-service (FFS) coverage for all Medicare entitled months.
Total Standardized Medicare Payment	TOT_MDCR_STDZD_PYMT_AMT	Total FFS Medicare payment for beneficiaries, adjusted for geographic differences in payment rates.
Actual Per Capita Medicare Payment	TOT_MDCR_PYMT_PC	Actual per capita FFS Medicare payment for beneficiaries.

Standardized Per Capita Medicare Payment	TOT_MDCR_STDZD_PYMT_PC	Actual per capita FFS Medicare payment for beneficiaries, adjusted for geographic differences in payment rates.
IP Actual Medicare Payment	IP_MDCR_PYMT_AMT	Actual FFS Medicare payment for Hospital Inpatient services, which are comprised of Inpatient Prospective Payment System (IPPS), Critical Access Hospitals (CAH), Inpatient Psychiatric Facility (IPF) services, and other inpatient Part A services.
IP Actual Medicare Payment as % of Total Actual Medicare Payment	IP_MDCR_PYMT_PCT	Actual FFS Medicare payment for Hospital Inpatient services as a percent of total actual FFS Medicare payment.
IP Per Capita Actual Medicare Payment	IP_MDCR_PYMT_PC	Actual per capita FFS Medicare payment for Hospital Inpatient services.
IP Per User Actual Medicare Payment	IP_MDCR_PYMT_PER_USER	Actual per user FFS Medicare payment for Hospital Inpatient services.
IP Standardized Medicare Payment	IP_MDCR_STDZD_PYMT_AMT	FFS Medicare payment for Hospital Inpatient services, adjusted for geographic differences in payment rates.
IP Standardized Medicare Payment as % of Total Standardized Medicare Payment	IP_MDCR_STDZD_PYMT_PCT	FFS Medicare payment for Hospital Inpatient services as a percentage of total FFS Medicare payment, adjusted for geographic differences in payment rates.
IP Per Capita Standardized Medicare Payment	IP_MDCR_STDZD_PYMT_PC	Per capita FFS Medicare payment for Hospital Inpatient services, adjusted for geographic differences in payment rates.
IP Per User Standardized Medicare Payment	IP_MDCR_STDZD_PYMT_PER_USER	Per user FFS Medicare payment for Hospital Inpatient services, adjusted for geographic differences in payment rates.
IP Users (with a covered stay)	BENES_IP_CVRD_STAY_CNT	Number of FFS Medicare beneficiaries using Hospital Inpatient services with at least one covered stay.
% of Beneficiaries Using IP	BENES_IP_PCT	Percentage of FFS Medicare beneficiaries using Hospital Inpatient services with at least one covered stay.
IP Covered Stays Per 1,000 Beneficiaries	IP_CVRD_STAYS_PER_1000_BENES	Number of Hospital Inpatient covered stays per 1,000 FFS Medicare beneficiaries.
IP Covered Days Per 1,000 Beneficiaries	IP_CVRD_DAYS_PER_1000_BENES	Number of Hospital Inpatient covered days per 1,000 FFS Medicare beneficiaries.
Number of Acute Hospital Readmissions	ACUTE_HOSP_READMSN_CNT	Total count of inpatient readmissions within 30 days of an acute hospital stay during the reference period, where the reference period refers to an inpatient hospital stay during the calendar year, regardless of whether the readmission was planned or unplanned.
Hospital Readmission Rate	ACUTE_HOSP_READMSN_PCT	Percentage of inpatient readmissions within 30 days of an acute hospital stay during the reference period, regardless of whether the readmission was planned or unplanned.
Emergency Department Visits	BENES_ER_VISITS_CNT	Total count of inpatient or hospital outpatient Emergency Department visits.
Emergency Department Visits per 1,000 Beneficiaries	ER_VISITS_PER_1000_BENES	Number of inpatient or hospital outpatient Emergency Department visits per 1,000 FFS Medicare beneficiaries.

% of Beneficiaries with an ED Visit	BENES_ER_VISITS_PCT	Percentage of FFS Medicare beneficiaries who had at least one Emergency Department visit during the year.
OP Actual Medicare Payment	OP_MDCR_PYMT_AMT	Actual FFS Medicare payment for Hospital Outpatient department services, which are comprised of hospitals reimbursed under the Outpatient Prospective Payment System (OPPS) and Critical Access Hospital (CAH) outpatient department services.
OP Actual Medicare Payment as % of Total Actual Medicare Payment	OP_MDCR_PYMT_PCT	Actual FFS Medicare payment for Hospital Outpatient department services, as a percentage of total actual FFS Medicare payment.
OP Per Capita Actual Medicare Payment	OP_MDCR_PYMT_PC	Actual per capita FFS Medicare payment for Hospital Outpatient department services.
OP Per User Actual Medicare Payment	OP_MDCR_PYMT_PER_USER	Actual per user FFS Medicare payment for Hospital Outpatient department services.
OP Standardized Medicare Payment	OP_MDCR_STDZD_PYMT_AMT	FFS Medicare payment for Hospital Outpatient department services, adjusted for geographic differences in payment rates.
OP Standardized Medicare Payment as % of Total Standardized Medicare Payment	OP_MDCR_STDZD_PYMT_PCT	FFS Medicare payment for Hospital Outpatient department services as a percentage of total FFS Medicare payment, adjusted for geographic differences in payment rates.
OP Per Capita Standardized Medicare Payment	OP_MDCR_STDZD_PYMT_PC	Per capita FFS Medicare payment for Hospital Outpatient department services, adjusted for geographic differences in payment rates.
OP Per User Standardized Medicare Payment	OP_MDCR_STDZD_PYMT_PER_USER	Per user FFS Medicare payment for Hospital Outpatient department services, adjusted for geographic differences in payment rates.
# OP Users	BENES_OP_CNT	Number of FFS Medicare beneficiaries using Hospital Outpatient department services.
% of Beneficiaries Using OP	BENES_OP_PCT	Percentage of FFS Medicare beneficiaries using Hospital Outpatient department services.
OP Visits Per 1,000 Beneficiaries	OP_VISITS_PER_1000_BENES	Number of Hospital Outpatient department visits per 1,000 FFS Medicare beneficiaries.
ASC Actual Medicare Payment	ASC_MDCR_PYMT_AMT	Actual FFS Medicare payment for Ambulatory Surgery Center (ASC) services.
ASC Actual Medicare Payment as % of Total Actual Medicare Payment	ASC_MDCR_PYMT_PCT	Actual FFS Medicare payment for Ambulatory Surgery Center (ASC) services, as a percentage of total actual FFS Medicare payment.
ASC Per Capita Actual Medicare Payment	ASC_MDCR_PYMT_PC	Actual per capita FFS Medicare payment for Ambulatory Surgery Center (ASC) services.
ASC Per User Actual Medicare Payment	ASC_MDCR_PYMT_PER_USER	Actual per user FFS Medicare payment for Ambulatory Surgery Center (ASC) services.
ASC Standardized Medicare Payment	ASC_MDCR_STDZD_PYMT_AMT	FFS Medicare payment for Ambulatory Surgery Center (ASC) services, adjusted for geographic differences in payment rates.

ASC Standardized Medicare Payment as % of Total Standardized Medicare Payment	ASC_MDCR_STDZD_PYMT_PCT	FFS Medicare payment for Ambulatory Surgery Center (ASC) services as a percentage of total FFS Medicare payment, adjusted for geographic differences in payment rates.
ASC Per Capita Standardized Medicare Payment	ASC_MDCR_STDZD_PYMT_PC	Per capita FFS Medicare payment for Ambulatory Surgery Center (ASC) services, adjusted for geographic differences in payment rates.
ASC Per User Standardized Medicare Payment	ASC_MDCR_STDZD_PYMT_PER_USER	Per user FFS Medicare payment for Ambulatory Surgery Center (ASC) services, adjusted for geographic differences in payment rates.
# ASC Users	BENES_ASC_CNT	Number of FFS Medicare beneficiaries using Ambulatory Surgery Center (ASC) services.
% of Beneficiaries Using ASC	BENES_ASC_PCT	Percentage of FFS Medicare beneficiaries using Ambulatory Surgery Center (ASC) services.
ASC Events Per 1,000 Beneficiaries	ASC_EVENTS_PER_1000_BENES	Number of Ambulatory Surgery Center (ASC) events per 1,000 FFS Medicare beneficiaries. NOTE: Suppressed for 2014-2021, due to changes in how events were calculated between the historical data and the most recent data.
SNF Actual Medicare Payment	SNF_MDCR_PYMT_AMT	Actual FFS Medicare payment for Post-acute care Skilled Nursing Facility (SNF) services.
SNF Actual Medicare Payment as % of Total Actual Medicare Payment	SNF_MDCR_PYMT_PCT	Actual FFS Medicare payment for Skilled Nursing Facility (SNF) services as a percent of total actual FFS Medicare payment.
SNF Per Capita Actual Medicare Payment	SNF_MDCR_PYMT_PC	Actual per capita FFS Medicare payment for Skilled Nursing Facility (SNF) services.
SNF Per User Actual Medicare Payment	SNF_MDCR_PYMT_PER_USER	Actual per user FFS Medicare payment for Skilled Nursing Facility (SNF) services.
SNF Standardized Medicare Payment	SNF_MDCR_STDZD_PYMT_AMT	FFS Medicare payment for Skilled Nursing Facility (SNF) services, adjusted for geographic differences in payment rates.
SNF Standardized Medicare Payment as % of Total Standardized Medicare Payment	SNF_MDCR_STDZD_PYMT_PCT	FFS Medicare payment for Skilled Nursing Facility (SNF) services as a percentage of total FFS Medicare payment, adjusted for geographic differences in payment rates.
SNF Per Capita Standardized Medicare Payment	SNF_MDCR_STDZD_PYMT_PC	Per capita FFS Medicare payment for Skilled Nursing Facility (SNF) services, adjusted for geographic differences in payment rates.
SNF Per User Standardized Medicare Payment	SNF_MDCR_STDZD_PYMT_PER_USER	Per user FFS Medicare payment for Skilled Nursing Facility (SNF) services, adjusted for geographic differences in payment rates.
# SNF Users (with a covered stay)	BENES_SNF_CNT	Number of FFS Medicare beneficiaries using Skilled Nursing Facility (SNF) services with at least one covered stay.
% of Beneficiaries Using SNF	BENES_SNF_PCT	Percentage of FFS Medicare beneficiaries using Skilled Nursing Facility (SNF) services with at least one covered stay.

SNF Covered Stays Per 1,000 Beneficiaries	SNF_CVRD_STAYS_PER_1000_BENES	Number of Skilled Nursing Facility (SNF) covered stays per 1,000 FFS Medicare beneficiaries.
SNF Covered Days Per 1,000 Beneficiaries	SNF_CVRD_DAYS_PER_1000_BENES	Number of Skilled Nursing Facility (SNF) covered days per 1,000 FFS Medicare beneficiaries.
IRF Actual Medicare Payment	IRF_MDCR_PYMT_AMT	Actual FFS Medicare payment for Inpatient Rehabilitation Facility (IRF) services.
IRF Actual Medicare Payment as % of Total Actual Medicare Payment	IRF_MDCR_PYMT_PCT	Actual FFS Medicare payment for Inpatient Rehabilitation Facility (IRF) services as a percent of total actual FFS Medicare payment.
IRF Per Capita Actual Medicare Payment	IRF_MDCR_PYMT_PC	Actual per capita FFS Medicare payment for Inpatient Rehabilitation Facility (IRF) services.
IRF Per User Actual Medicare Payment	IRF_MDCR_PYMT_PER_USER	Actual per user FFS Medicare payment for Inpatient Rehabilitation Facility (IRF) services.
IRF Standardized Medicare Payment	IRF_MDCR_STDZD_PYMT_AMT	FFS Medicare payment for Inpatient Rehabilitation Facility (IRF) services, adjusted for geographic differences in payment rates.
IRF Standardized Medicare Payment as % of Total Standardized Medicare Payment	IRF_MDCR_STDZD_PYMT_PCT	FFS Medicare payment for Inpatient Rehabilitation Facility (IRF) services as a percentage of total FFS Medicare payment, adjusted for geographic differences in payment rates.
IRF Per Capita Standardized Medicare Payment	IRF_MDCR_STDZD_PYMT_PC	Per capita FFS Medicare payment for Inpatient Rehabilitation Facility (IRF) services, adjusted for geographic differences in payment rates.
IRF Per User Standardized Medicare Payment	IRF_MDCR_STDZD_PYMT_PER_USER	Per user FFS Medicare payment for Inpatient Rehabilitation Facility (IRF) services, adjusted for geographic differences in payment rates.
# IRF Users (with a covered stay)	BENES_IRF_CNT	Number of FFS Medicare beneficiaries using Inpatient Rehabilitation Facility (IRF) services with at least one covered stay.
% of Beneficiaries Using IRF	BENES_IRF_PCT	Percentage of FFS Medicare beneficiaries using Inpatient Rehabilitation Facility (IRF) services with at least one covered stay.
IRF Covered Stays Per 1,000 Beneficiaries	IRF_CVRD_STAYS_PER_1000_BENES	Number of Inpatient Rehabilitation Facility (IRF) covered stays per 1,000 FFS Medicare beneficiaries.
IRF Covered Days Per 1,000 Beneficiaries	IRF_CVRD_DAYS_PER_1000_BENES	Number of Inpatient Rehabilitation Facility (IRF) covered days per 1,000 FFS Medicare beneficiaries.
LTCH Actual Medicare Payment	LTCH_MDCR_PYMT_AMT	Actual FFS Medicare payment for Long-Term Care Hospital (LTCH) services.
LTCH Actual Medicare Payment as % of Total Actual Medicare Payment	LTCH_MDCR_PYMT_PCT	Actual FFS Medicare payment for Long-Term Care Hospital (LTCH) services as a percent of total actual Medicare payment.
LTCH Per Capita Actual Medicare Payment	LTCH_MDCR_PYMT_PC	Actual per capita FFS Medicare payment for Long-Term Care Hospital (LTCH) services.
LTCH Per User Actual Medicare Payment	LTCH_MDCR_PYMT_PER_USER	Actual per user FFS Medicare payment for Long-Term Care Hospital (LTCH) services.

LTCH Standardized Medicare Payment	LTCH_MDCR_STDZD_PYMT_AMT	FFS Medicare payment for Long-Term Care Hospital (LTCH) services, adjusted for geographic differences in payment rates.
LTCH Standardized Medicare Payment as % of Total Standardized Medicare Payment	LTCH_MDCR_STDZD_PYMT_PCT	FFS Medicare payment for Long-Term Care Hospital (LTCH) services as a percentage of total FFS Medicare payment, adjusted for geographic differences in payment rates.
LTCH Per Capita Standardized Medicare Payment	LTCH_MDCR_STDZD_PYMT_PC	Per capita FFS Medicare payment for Long-Term Care Hospital (LTCH) services, adjusted for geographic differences in payment rates.
LTCH Per User Standardized Medicare Payment	LTCH_MDCR_STDZD_PYMT_PER_USER	Per user FFS Medicare payment for Long-Term Care Hospital (LTCH) services, adjusted for geographic differences in payment rates.
LTCH Users (with a covered stay)	BENES_LTCH_CNT	Number of FFS Medicare beneficiaries using Long-Term Care Hospital (LTCH) services with at least one covered stay.
% of Beneficiaries Using LTCH	BENES_LTCH_PCT	Percentage of FFS Medicare beneficiaries using Long-Term Care Hospital (LTCH) services with at least one covered stay.
LTCH Covered Stays Per 1,000 Beneficiaries	LTCH_CVRD_STAYS_PER_1000_BENES	Number of Long-Term Care Hospital (LTCH) covered stays per 1,000 FFS Medicare beneficiaries.
LTCH Covered Days Per 1,000 Beneficiaries	LTCH_CVRD_DAYS_PER_1000_BENES	Number of Long-Term Care Hospital (LTCH) covered days per 1,000 FFS Medicare beneficiaries.
HH Actual Medicare Payment	HH_MDCR_PYMT_AMT	Actual FFS Medicare payment for Home Health services.
HH Actual Medicare Payment as % of Total Actual Medicare Payment	HH_MDCR_PYMT_PCT	Actual FFS Medicare payment for Home Health services, as a percentage of total actual FFS Medicare payment.
HH Per Capita Actual Medicare Payment	HH_MDCR_PYMT_PC	Actual per capita FFS Medicare payment for Home Health services.
HH Per User Actual Medicare Payment	HH_MDCR_PYMT_PER_USER	Actual per user FFS Medicare payment for Home Health services.
HH Standardized Medicare Payment	HH_MDCR_STDZD_PYMT_AMT	FFS Medicare payment for Home Health services, adjusted for geographic differences in payment rates.
HH Standardized Medicare Payment as % of Total Standardized Medicare Payment	HH_MDCR_STDZD_PYMT_PCT	FFS Medicare payment for Home Health services as a percentage of total FFS Medicare payment, adjusted for geographic differences in payment rates.
HH Per Capita Standardized Medicare Payment	HH_MDCR_STDZD_PYMT_PC	Per capita FFS Medicare payment for Home Health services, adjusted for geographic differences in payment rates.
HH Per User Standardized Medicare Payment	HH_MDCR_STDZD_PYMT_PER_USER	Per user FFS Medicare payment for Home Health services, adjusted for geographic differences in payment rates.
# HH Users	BENES_HH_CNT	Number of FFS Medicare beneficiaries using Home Health services.
% of Beneficiaries Using HH	BENES_HH_PCT	Percentage of FFS Medicare beneficiaries using Home Health services.
HH Episodes Per 1,000 Beneficiaries	HH_EPISODES_PER_1000_BENES	Number of Home Health episodes per 1,000 FFS Medicare beneficiaries.
HH Visits Per 1,000 Beneficiaries	HH_VISITS_PER_1000_BENES	Number of Home Health visits per 1,000 FFS Medicare beneficiaries.

Hospice Actual Medicare Payment	HOSPC_MDCR_PYMT_AMT	Actual FFS Medicare payment for Hospice services.
Hospice Actual Medicare Payment as % of Total Actual Medicare Payment	HOSPC_MDCR_PYMT_PCT	Actual FFS Medicare payment for Hospice services as a percent of total actual FFS Medicare payment.
Hospice Per Capita Actual Medicare Payment	HOSPC_MDCR_PYMT_PC	Actual per capita FFS Medicare payment for Hospice services.
Hospice Per User Actual Medicare Payment	HOSPC_MDCR_PYMT_PER_USER	Actual per user FFS Medicare payment for Hospice services.
Hospice Standardized Medicare Payment	HOSPC_MDCR_STDZD_PYMT_AMT	FFS Medicare payment for Hospice services, adjusted for geographic differences in payment rates.
Hospice Standardized Medicare Payment as % of Total Standardized Medicare Payment	HOSPC_MDCR_STDZD_PYMT_PCT	FFS Medicare payment for Hospice services as a percentage of total FFS Medicare payment, adjusted for geographic differences in payment rates.
Hospice Per Capita Standardized Medicare Payment	HOSPC_MDCR_STDZD_PYMT_PC	Per capita FFS Medicare payment for Hospice services, adjusted for geographic differences in payment rates.
Hospice Per User Standardized Medicare Payment	HOSPC_MDCR_STDZD_PYMT_PER_USER	Per user FFS Medicare payment for Hospice services, adjusted for geographic differences in payment rates.
# Hospice Users (with a covered stay)	BENES_HOSPC_CNT	Number of FFS Medicare beneficiaries using Hospice services with at least one covered stay.
% of Beneficiaries Using Hospice	BENES_HOSPC_PCT	Percentage of FFS Medicare beneficiaries using Hospice services with at least one covered stay.
Hospice Covered Stays Per 1,000 Beneficiaries	HOSPC_CVRD_STAYS_PER_1000_BENES	Number of Hospice covered stays per 1,000 FFS Medicare beneficiaries.
Hospice Covered Days Per 1,000 Beneficiaries	HOSPC_CVRD_DAYS_PER_1000_BENES	Number of Hospice covered days per 1,000 FFS Medicare beneficiaries.
Outpatient Dialysis Facility Actual Medicare Payment	OP_DLYS_MDCR_PYMT_AMT	Actual Medicare payment for Outpatient Dialysis Facility services.
Outpatient Dialysis Facility Actual Medicare Payment as % of Total Actual Medicare Payment	OP_DLYS_MDCR_PYMT_PCT	Actual Medicare payment for Outpatient Dialysis Facility services, as a percentage of total actual Medicare payment.
Outpatient Dialysis Facility Per Capita Actual Medicare Payment	OP_DLYS_MDCR_PYMT_PC	Actual per capita Medicare payment for Outpatient Dialysis Facility services.
Outpatient Dialysis Facility Per User Actual Medicare Payment	OP_DLYS_MDCR_PYMT_PER_USER	Actual per user Medicare payment for Outpatient Dialysis Facility services.
Outpatient Dialysis Facility Standardized Medicare Payment	OP_DLYS_MDCR_STDZD_PYMT_AMT	Medicare payment for Outpatient Dialysis Facility services, adjusted for geographic differences in payment rates.
Outpatient Dialysis Facility Standardized Medicare Payment as % of Total Standardized Medicare Payment	OP_DLYS_MDCR_STDZD_PYMT_PCT	Medicare payment for Outpatient Dialysis Facility services as a percentage of total Medicare payment, adjusted for geographic differences in payment rates.
Outpatient Dialysis Facility Per Capita Standardized Medicare Payment	OP_DLYS_MDCR_STDZD_PYMT_PC	Per capita Medicare payment for Outpatient Dialysis Facility services, adjusted for geographic differences in payment rates.
Outpatient Dialysis Facility Per User Standardized Medicare Payment	OP_DLYS_MDCR_STDZD_PYMT_PER_USER	Per user Medicare payment for Outpatient Dialysis Facility services, adjusted for geographic differences in payment rates.
# Outpatient Dialysis Facility Users	BENES_OP_DLYS_CNT	Number of beneficiaries using Outpatient Dialysis Facility services.

% of Beneficiaries Using Outpatient Dialysis Facility	BENES_OP_DLYS_PCT	Percentage of beneficiaries using Outpatient Dialysis Facility services.
Outpatient Dialysis Facility Visits Per 1,000 Beneficiaries	OP_DLYS_VISITS_PER_1000_BENES	Number of Outpatient Dialysis Facility visits per 1,000 Medicare beneficiaries.
FQHC/RHC Actual Medicare Payment	FQHC_RHC_MDCR_PYMT_AMT	Actual Medicare payment for Federally Qualified Health Center (FQHC) / Rural Health Center (RHC) services.
FQHC/RHC Actual Medicare Payment as % of Total Actual Medicare Payment	FQHC_RHC_MDCR_PYMT_PCT	Actual Medicare payment for FQHC/RHC services, as a percentage of total actual Medicare payment.
FQHC/RHC Per Capita Actual Medicare Payment	FQHC_RHC_MDCR_PYMT_PC	Actual per capita Medicare payment for FQHC/RHC services.
FQHC/RHC Per User Actual Medicare Payment	FQHC_RHC_MDCR_PYMT_PER_USER	Actual per user Medicare payment for FQHC/RHC services.
FQHC/RHC Standardized Medicare Payment	FQHC_RHC_MDCR_STDZD_PYMT_AMT	Medicare payment for FQHC/RHC services, adjusted for geographic differences in payment rates.
FQHC/RHC Standardized Medicare Payment as % of Total Standardized Medicare Payment	FQHC_RHC_MDCR_STDZD_PYMT_PCT	Medicare payment for FQHC/RHC services as a percentage of total Medicare payment, adjusted for geographic differences in payment rates.
FQHC/RHC Per Capita Standardized Medicare Payment	FQHC_RHC_MDCR_STDZD_PYMT_PC	Per capita Medicare payment for FQHC/RHC services, adjusted for geographic differences in payment rates.
FQHC/RHC Per User Standardized Medicare Payment	FQHC_RHC_MDCR_STDZD_PYMT_PU	Per user Medicare payment for FQHC/RHC services, adjusted for geographic differences in payment rates.
# FQHC/RHC Users	BENES_FQHC_RHC_CNT	Number of beneficiaries using FQHC/RHC services.
% of Beneficiaries Using FQHC/RHC	BENES_FQHC_RHC_PCT	Percentage of beneficiaries using FQHC/RHC services.
FQHC/RHC Visits Per 1,000 Beneficiaries	FQHC_RHC_VISITS_PER_1000_BENES	Number of FQHC/RHC visits per 1,000 Medicare beneficiaries.
Total Population Based Payment Reduction Medicare Payment**	TOT_PBPMT_RDCTN_AMT	Total Population-Based Payment (PBP) Reduction payment for FFS Medicare beneficiaries.
Total Population Based Payment Reduction Per Capita Medicare Payment**	TOT_PBPMT_RDCTN_PCC	Per capita Population-Based Payment (PBP) Reduction payment for FFS Medicare beneficiaries.
PQI03 Diabetes LT Complication Admission Rate (age < 65)	PQI03_DBTS_AGE_LT_65	Prevention Quality Indicator (PQI) 3: Hospital admissions for Diabetes Long-Term complications for FFS Medicare beneficiaries ages less than 65 per 100,000 FFS Medicare beneficiaries.
PQI03 Diabetes LT Complication Admission Rate (age 65-74)	PQI03_DBTS_AGE_65_74	Prevention Quality Indicator (PQI) 3: Hospital admissions for Diabetes Long-Term complications for FFS Medicare beneficiaries ages 65-74 per 100,000 FFS Medicare beneficiaries.
PQI03 Diabetes LT Complication Admission Rate (age 75+)	PQI03_DBTS_AGE_GE_75	Prevention Quality Indicator (PQI) 3: Hospital admissions for Diabetes Long-Term complications for FFS Medicare beneficiaries ages 75 and older per 100,000 FFS Medicare beneficiaries.

PQI05 COPD or Asthma in Older Adults Admission Rate (age 40-64)	PQI05_COPD_ASTHMA_AGE_40_64	Prevention Quality Indicator (PQI) 5: Hospital admissions for Chronic Obstructive Pulmonary Disease (COPD) or Asthma for FFS Medicare beneficiaries ages 40-64 per 100,000 FFS Medicare beneficiaries.
PQI05 COPD or Asthma in Older Adults Admission Rate (age 65-74)	PQI05_COPD_ASTHMA_AGE_65_74	Prevention Quality Indicator (PQI) 5: Hospital admissions for Chronic Obstructive Pulmonary Disease (COPD) or Asthma for FFS Medicare beneficiaries ages 65-74 per 100,000 FFS Medicare beneficiaries.
PQI05 COPD or Asthma in Older Adults Admission Rate (age 75+)	PQI05_COPD_ASTHMA_AGE_GE_75	Prevention Quality Indicator (PQI) 5: Hospital admissions for Chronic Obstructive Pulmonary Disease (COPD) or Asthma for FFS Medicare beneficiaries ages 75 and older per 100,000 FFS Medicare beneficiaries.
PQI07 Hypertension Admission Rate (age < 65)	PQI07_HYPRTNSN_AGE_LT_65	Prevention Quality Indicator (PQI) 7: Hospital admissions for Hypertension for FFS Medicare beneficiaries ages less than 65 per 100,000 FFS Medicare beneficiaries.
PQI07 Hypertension Admission Rate (age 65-74)	PQI07_HYPRTNSN_AGE_65_74	Prevention Quality Indicator (PQI) 7: Hospital admissions for Hypertension for FFS Medicare beneficiaries ages 65-74 per 100,000 FFS Medicare beneficiaries.
PQI07 Hypertension Admission Rate (age 75+)	PQI07_HYPRTNSN_AGE_GE_75	Prevention Quality Indicator (PQI) 7: Hospital admissions for Hypertension for FFS Medicare beneficiaries ages 75 and older per 100,000 FFS Medicare beneficiaries.
PQI08 CHF Admission Rate (age < 65)	PQI08_CHF_AGE_LT_65	Prevention Quality Indicator (PQI) 8: Hospital admissions for Congestive Heart Failure (CHF) in FFS Medicare beneficiaries ages less than 65 per 100,000 FFS Medicare beneficiaries.
PQI08 CHF Admission Rate (age 65-74)	PQI08_CHF_AGE_65_74	Prevention Quality Indicator (PQI) 8: Hospital admissions for Congestive Heart Failure (CHF) in FFS Medicare beneficiaries ages 65-74 per 100,000 FFS Medicare beneficiaries.
PQI08 CHF Admission Rate (age 75+)	PQI08_CHF_AGE_GE_75	Prevention Quality Indicator (PQI) 8: Hospital admissions for Congestive Heart Failure (CHF) in FFS Medicare beneficiaries ages 75 and older per 100,000 FFS Medicare beneficiaries.
PQI11 Bacterial Pneumonia Admission Rate (age < 65)	PQI11_BCTRL_PNA_AGE_LT_65	Prevention Quality Indicator (PQI) 11: Hospital admissions for Bacterial Pneumonia for FFS Medicare beneficiaries ages less than 65 per 100,000 FFS Medicare beneficiaries.
PQI11 Bacterial Pneumonia Admission Rate (age 65-74)	PQI11_BCTRL_PNA_AGE_65_74	Prevention Quality Indicator (PQI) 11: Hospital admissions for Bacterial Pneumonia for FFS Medicare beneficiaries ages 65-74 per 100,000 FFS Medicare beneficiaries.

PQI11 Bacterial Pneumonia Admission Rate (age 75+)	PQI11_BCTRL_PNA_AGE_GE_75	Prevention Quality Indicator (PQI) 11: Hospital admissions for Bacterial Pneumonia for FFS Medicare beneficiaries ages 75 and older per 100,000 FFS Medicare beneficiaries.
PQI12 UTI Admission Rate (age < 65)	PQI12_UTI_AGE_LT_65	Prevention Quality Indicator (PQI) 12: Hospital admissions for Urinary Tract Infections (UTI) for FFS Medicare beneficiaries ages less than 65 per 100,000 FFS Medicare beneficiaries.
PQI12 UTI Admission Rate (age 65-74)	PQI12_UTI_AGE_65_74	Prevention Quality Indicator (PQI) 12: Hospital admissions for Urinary Tract Infections (UTI) for FFS Medicare beneficiaries ages 65-74 per 100,000 FFS Medicare beneficiaries.
PQI12 UTI Admission Rate (age 75+)	PQI12_UTI_AGE_GE_75	Prevention Quality Indicator (PQI) 12: Hospital admissions for Urinary Tract Infections (UTI) for FFS Medicare beneficiaries ages 75 and older per 100,000 FFS Medicare beneficiaries.
PQI15 Asthma in Younger Adults Admission Rate (age < 40)	PQI15_ASTHMA_AGE_LT_40	Prevention Quality Indicator (PQI) 15: Hospital admissions for Asthma for FFS Medicare beneficiaries ages less than 40 per 100,000 FFS Medicare beneficiaries.
PQI16 Lower Extremity Amputation Admission Rate (age < 65)	PQI16_LWRXTRMTY_AMPUTN_AGE_LT_65	Prevention Quality Indicator (PQI) 16: Hospital admissions for Lower Extremity Amputation of FFS Medicare beneficiaries ages less than 65 per 100,000 FFS Medicare beneficiaries.
PQI16 Lower Extremity Amputation Admission Rate (age 65-74)	PQI16_LWRXTRMTY_AMPUTN_AGE_65_74	Prevention Quality Indicator (PQI) 16: Hospital admissions for Lower Extremity Amputation of FFS Medicare beneficiaries ages 65-74 per 100,000 FFS Medicare beneficiaries.
PQI16 Lower Extremity Amputation Admission Rate (age 75+)	PQI16_LWRXTRMTY_AMPUTN_AGE_GE_75	Prevention Quality Indicator (PQI) 16: Hospital admissions for Lower Extremity Amputation for FFS Medicare beneficiaries ages 75 and older per 100,000 FFS Medicare beneficiaries.

Notes:

All variables are suppressed where the count of beneficiaries or count of users is less than 11.

Suppressed variables are marked with "**".

* Data is suppressed for Puerto Rico, the Virgin Islands, and all other U.S. territories.

** Data is only available for 2017-2021.

List of Acronyms:

ASC - Ambulatory Surgery Center

CHF - Congestive Heart Failure

COPD - Chronic Obstructive Pulmonary Disease

ED - Emergency Department

FFS - Fee-for-Service

FQHC - Federally Qualified Health Center

HCC - Hierarchical Condition Category

HH - Home Health

IP - Inpatient

IRF - Inpatient Rehabilitation Facility
LTCH - Long-Term Care Hospital
MA - Medicare Advantage
OP - Outpatient
PQI - Prevention Quality Indicator
RHC - Rural Health Center
SNF - Skilled Nursing Facility
UTI - Urinary Tract Infection