

Value Modifier Data Dictionary

Term Name	Variable Name	Definition	Footnotes	Applicable Performance Year(s)
Unique identifier of practice	practice_id	Unique identifier of practice	N/A	2013 - 2016
Location (state) of practice	state	State in which practice is located	N/A	2013 - 2016
Practice EP count category	num_eps_vm	Practice eligible professional count category. 0 EPs=Zero eligible professionals. 1-9 EPs=One to nine eligible professionals. 10 to 99 EPs=10 to 99 eligible professionals. 100+ EPs=100 or more eligible professionals.	N/A	2013 - 2016
Practice enrolled in MSSP	mssp	Indicator for whether practice was a Medicare Shared Savings Program Accountable Care Organization practice in the performance year. Equals 1 if practice was a Medicare Shared Savings Program Accountable Care Organization practice in the performance year.	This variable can be found only in the data for performance years 2015 and 2016.	2015 - 2016
GPRO practice	gpro	Indicator for whether practice registered to report data to the PQRS via the Group Practice Reporting Option (GPRO). Equals 1 if practice registered to report data to the PQRS via the Group Practice Reporting Option (GPRO).	N/A	2013 - 2016
Eligible for high-risk bonus adjustment	elig_up_adjust	Indicator for whether practice eligible for additional upward payment adjustment for treating disproportionate share of high-risk beneficiaries. N/A=Practice did not meet minimum PQRS reporting requirements in the performance year. Eligible=Practice eligible for additional upward payment adjustment for treating disproportionate share of high-risk beneficiaries. Not Eligible=Practice not eligible for additional upward payment adjustment for treating disproportionate share of high-risk beneficiaries.	N/A	2013 - 2016
Practice met minimum PQRS reporting requirements	category	Practice met minimum PQRS reporting requirements in the performance year. CAT1=Practice subject to the Value Modifier and met minimum PQRS reporting requirements in the performance year. CAT2=Practice subject to the Value Modifier and did not meet minimum PQRS reporting requirements in the performance year.	N/A	2013 - 2016

Value Modifier payment adjustment	vm_payment_adj	Value Modifier payment adjustment for practices subject to the Value Modifier. AF=Adjustment Factor.	N/A	2013 - 2016
Updated Value Modifier payment adjustment	updated_vm	Value Modifier payment adjustment, incorporating Informal Review change, if applicable. AF=Adjustment Factor.	N/A	2013 - 2016
Cost Composite Tier: High, Average, Low, N/A	cost_comp_tier_text	Cost Composite Tier value determined based on Cost Composite Score (High, Average, Low, N/A). N/A*=Practice did not meet minimum PQRS reporting requirements in the performance year. Low=Practice's Cost Composite Score is at least one standard deviation below benchmark and statistically significantly different from benchmark. Average*=Practice's Cost Composite Score is less than one standard deviation away from the benchmark, practice's Cost Composite Score is at least one standard deviation from benchmark but not statistically significantly different from benchmark, or practice does not have at least minimum number of eligible cases for any cost measures included in Cost Composite. High=Practice's Cost Composite Score is at least one standard deviation above benchmark and statistically significantly different from benchmark.	*For performance year 2013, N/A=For Category 2 (CAT2) practices: practice did not meet minimum 2013 PQRS reporting requirements. For Category 1 (CAT1) practices: (1) practice did not elect to be assessed via quality-tiering or (2) practice did not have sufficient data for a Quality Composite Score or Cost Composite Score to be calculated (that is, practice's Cost and/or Quality Composite Score is at least one standard deviation from benchmark but not statistically significantly different from benchmark, or practice does not have at least minimum number of eligible cases for any measures included in Cost and/or Quality Composite). Average=Practice's Cost Composite Score is less than one standard deviation away from the benchmark.	2013 - 2016
Quality Composite Tier: High, Average, Low, N/A	qual_comp_tier_text	Quality Composite Tier value determined based on Quality Composite Score (High, Average, Low, N/A). N/A*=Practice did not meet minimum PQRS reporting requirements in the performance year. Low=Practice's Quality Composite Score is at least one standard deviation below benchmark and statistically significantly different from benchmark. Average*=Practice's Quality Composite Score is less than one standard deviation away from the benchmark, practice's Quality Composite Score is at least one standard deviation from benchmark but not statistically significantly different from benchmark, or practice does not have at least minimum number of eligible cases for any quality measures with prior-year benchmark included in Quality Composite. High=Practice's Quality Composite Score is at least one standard deviation above benchmark and statistically significantly different from benchmark.	*For performance year 2013, N/A=For Category 2 (CAT2) practices: practice did not meet minimum 2013 PQRS reporting requirements. For Category 1 (CAT1) practices: (1) practice did not elect to be assessed via quality-tiering or (2) practice did not have sufficient data for a Quality Composite Score or Cost Composite Score to be calculated (that is, practice's Cost and/or Quality Composite Score is at least one standard deviation from benchmark but not statistically significantly different from benchmark, or practice does not have at least minimum number of eligible cases for any measures included in Cost and/or Quality Composite). Average=Practice's Quality Composite Score is less than one standard deviation away from the benchmark.	2013 - 2016

(Rounded) Standardized Cost Composite Score	zb_cost_cmpscr_p ool_rnd	Standardized Cost Composite Score, rounded to the nearest 0.01	N/A	2013 - 2016
(Rounded) Standardized Quality Composite Score	zb_qual_cmpscr_p ool_rnd	Standardized Quality Composite Score, rounded to the nearest 0.01	For performance year 2016, these scores do not reflect a negligible change to some practices' 30-day All-Cause Hospital Readmission rate that did not change the Value Modifier payment adjustment for any but one practice.	2013 - 2016