2022 QPP Public Use File: Data Dictionary

Overview

The 2022 Quality Payment Program (QPP) Public Use File (PUF) dataset includes clinician-level (non-aggregated) data for the 2022 performance year. It provides detailed data at the Taxpayer Identification Number (TIN)/National Provider Identifier (NPI) level regarding clinician eligibility, measure level scoring, performance category scoring, final scores, and payment adjustments factors (represented as percentages). The 2022 QPP PUF is released concurrently with the 2022 QPP Experience Report.

- In accordance with CMS Cell Suppression Policy, we've excluded TIN/NPIs with fewer than 11 patients from the PUF.

- As a result of this policy, **when clinician-level data in the PUF is aggregated, the aggregated counts won't match exactly the counts included in the 2022 QPP Experience Report (PDF) and the 2022 QPP Participation and Performance Results At-A-Glance (PDF)**.

Data Fields and Descriptions

The table below outlines the fields in the PUF, in order, and their associated description.

Column	Field	Data Type	Example	Description
A	Provider Key	Integer	1	Random unique key assigned to each row.
B	Practice State or US territory	String	MD	The Practice State or United States (US) territory code location of the Taxpayer Identifier Numbers (TIN) associated with the clinician.
C	Practice Size	Integer	1	Count of clinicians associated with the TIN through Medicare Part B claims from October 1, 2021, through September 30, 2022 (the second 12-month segment of the MIPS eligibility determination period for the 2022 performance year).
D	Clinician Type	String	Anesthesiologist Assistant	Clinician type is derived from the category associated with the specialty included on Medicare Part B claims and submitted to the Centers for Medicare & Medicaid Services (CMS) for reimbursement; clinician type is

				determined for each unique TIN/NPI combination associated with an individual clinician.
E	Clinician Specialty	String	Obstetrics/ Gynecology	Specialty is derived from the specialty codes in Medicare Part B claims submitted to CMS for reimbursement; specialty is determined for each unique TIN/NPI combination associated with an individual clinician.
F	Years in Medicare	Integer	10	The number of years since the first date on which an enrollment was approved for this NPI across all enrollments in PECOS (Provider, Enrollment, Chain and Ownership System).
G	NPI	Integer	1234567890	The National Provider Identifier (NPI) assigned to the clinician when they enrolled in Medicare. Multiple rows for the same NPI indicate that an individual clinician has reassigned billing rights to multiple TINs and was identified as a MIPS eligible clinician under multiple TIN/NPI combinations.
H	Non-Reporting	Boolean	TRUE	"Non-reporting" refers to an individually eligible clinician who didn't actively submit any data for the quality, Promoting Interoperability, or improvement activities performance categories. This includes clinicians who received reweighting in any or all performance categories as a result of an exception application, the Extreme and Uncontrollable Circumstances (EUC) policy, or special status. • Because the clinicians are individually eligible, they'll receive a final score and MIPS payment adjustment without actively submitting data. • The clinicians will be scored on administrative claims measures automatically calculated by CMS for the quality and cost performance categories.

I	Participation Option	String	Individual	The level at which data is collected and submitted to CMS for MIPS. There are 4 participation options for 2022: • **Individual:** Data is collected and submitted by or on behalf of an individual MIPS eligible clinician (identified by TIN/NPI). • **Group:** Data is collected and submitted on behalf of all MIPS eligible clinicians in a practice (identified by TIN). • **Virtual group:** Data is collected and submitted on behalf of all MIPS eligible clinicians in a CMS-approved virtual group (identified by virtual group ID). • **APM Entity:** Data is collected and submitted on behalf of the MIPS eligible clinicians in an APM Entity (identified by APM ID).

All data elements from this point forward are based on the Participation Option identified in the preceding column (column I).

• For example, if the participation option is "Group" (indicating the clinician received the group's final score), the number of Medicare Patients in column I is attributed to the group (identified by TIN), not the individual clinician.

Note: If the Participation Option indicates "APM Entity," the data elements related to the low-volume threshold and special status (columns J – V) are attributed to the clinician's group (TIN), not the APM Entity. (As of 2021, we don't evaluate APM Entities for the low-volume threshold.)

J	Medicare Patients	Integer	50	The number of Medicare patients who received covered professional services during one of the two 12-month segments of the MIPS eligibility determination period.
K	Allowed Charges	Float	50000.28	The allowed charges under the Physician Fee Schedule on Medicare Part B claims with a service date during one of the two 12-month segments of the MIPS eligibility determination period.
L	Services	Integer	50	The number of covered professional services provided to Medicare Part B patients with a service date during one of the two 12-month segments of the MIPS eligibility determination period.

M	Opted In to MIPS	Boolean	TRUE	Indicates if an "opt-in eligible" clinician or group elected to participate in MIPS and receive a payment adjustment. (A clinician or group that is otherwise eligible for MIPS and exceeds 1 or 2, but not all 3 low-volume threshold criteria, is considered "opt-in eligible.") Learn more on the QPP website.
N	Small Practice Status	Boolean	TRUE	Indicates if the clinician or group had the small practice special status (15 or fewer clinicians billed under the TIN) based on one of the two 12-month segments of the MIPS eligibility determination period. Solo practitioners also receive this special status. Learn more about the small practice status on the QPP website. Note: This number may contradict the small Practice Size (15 or fewer clinicians) identified in column 3, which is always based on the second 12 months of the MIPS eligibility determination period (October 1, 2021 – September 30, 2022, for the 2022 performance year).
O	Rural Status	Boolean	TRUE	Indicates if the clinician or group had the rural special status (practiced in a ZIP code designated as rural by the Federal Office of Rural Health Policy (FORHP) using the most recent FORHP Eligible ZIP code file available). Learn more about the rural status on the QPP website.
P	Health Professional Shortage Area Status	Boolean	TRUE	Indicates if the clinician or group had the HPSA special status (practiced in a Health Professional Shortage Area [HPSA]). Learn more about the HPSA status on the QPP website.
Q	Ambulatory Surgical Center-Based Status	Boolean	TRUE	Indicates if the clinician or group had the ambulatory surgical center-based (ASC-based) special status, which is determined by the volume of their covered professional services furnished in an ambulatory surgical center. Learn more about the ASC-based status on the QPP website.

R	Hospital-Based Status	Boolean	TRUE	Indicates if the clinician or group had the hospital-based special status, which is determined by the volume of their covered professional services furnished in a hospital setting. [Learn more about the hospital-based status on the QPP website.](#)
S	Non-Patient Facing Status	Boolean	TRUE	Indicates if the clinician or group has the non-patient facing special status, which is determined by volume of Medicare Part B patient-facing encounters, including telehealth services. [Learn more about the non-patient facing status on the QPP website.](#)
T	Facility-Based Status	Boolean	TRUE	Indicates if the clinician or group has the facility-based special status, which is determined based on volume of services furnished in a facility eligible for the Hospital Value-based Purchasing program. [Learn more about the facility-based status on the QPP website.](#)
U	Dual Eligibility Ratio	Float	0.11	Dual Eligibility Ratio is derived by using the following formula: the number of unique Medicare patients who are also Medicaid eligible and who received covered professional services between October 1, 2021, and September 30, 2022, divided by the number of unique Medicare patients seen during the same time period.
V	Safety-Net Status	Boolean	FALSE	Indicates if the dual eligibility ratio falls in the top 20th percentile of all MIPS eligible clinicians.
W	Extreme and uncontrollable circumstances (EUC)	Boolean	TRUE	Indicates if the clinician, group, or APM Entity was affected by extreme and uncontrollable circumstances (EUC) and qualified for reweighting in one or more performance categories because of the MIPS automatic EUC policy or an approved [MIPS EUC exception application](#).
X	Final Score	Float	56.66	The MIPS final score attributed to the clinician (identified by TIN/NPI combination).
Y	Payment Adjustment Percentage	Float	1.26	The total payment adjustment percentage associated with the clinician's 2022 final score. Payment

				adjustments are determined by comparing the final score to the performance thresholds and then scaled to ensure budget neutrality. 2024 is the payment year for performance year 2022.
				• **Max Negative:** The maximum negative payment adjustment is -9%.
				o Final score between 0 and 18.75 points.
				• **Negative:** A negative payment adjustment is between -9% and 0%.
				o Final score between 18.76 and 74.99 points.
				• **Neutral:** A neutral payment adjustment is 0% (i.e., no increase or decrease to payment).
				o Final score of 75 points.
				• **Positive Only:** A positive payment adjustment is greater than 0%.
				o Final score between 75.01 and 88.99 points.
				• **Exceptional**: An exceptional payment adjustment is greater than 0%.
				o Final score of 89 points or higher.
Z	Complex Patient Bonus	Float	3.67	The complex patient bonus points (added to the final score, based on the medical and social complexity of the patient population) associated with the final score attributed to the clinician.
AA	Quality Reweighting (EUC)	Boolean	TRUE	Indicates if the clinician, group, or APM Entity was approved for reweighting of the quality performance category due

				to extreme and uncontrollable circumstances. (Note: "True" indicates approval for reweighting, not whether the performance category was ultimately reweighted. Data submission overrides performance category reweighting on a category-by-category basis.)
AB	Quality Category Score	Float	72.34	The unweighted quality score is the sum of points earned (including small practice bonus points) divided by the sum of available points for the performance category plus to quality improvement. The unweighted score is represented as a percentage from 0 – 100, before it's multiplied by the performance category's weight.
AC	Quality Improvement Score	Float	8.32	The points representing the rate of improvement from the prior year's quality score; there are between 0 and 10 percentage points available for quality improvement.
AD	Small Practice Bonus	Float	6	The small practice bonus points received for the quality category (if applicable).
AE	Quality Measure ID 1	String	128	MIPS Quality ID for one of the quality measures that contributed to the final score.
AF	Quality Measure ID 1 Collection Type	String	claims[1]	The collection type of the measure submitted. (Each collection type has its own specification and specific benchmark used to determine how many points the quality measure earns.)
AG	Quality Measure Score 1	Float	9.7	Measure score achieved for the corresponding MIPS Quality ID that contributed to the final score.
AH	Quality Measure ID 2	String	111	MIPS Quality ID for one of the quality measures that contributed to the final score.
AI	Quality Measure ID 2 Collection Type	String	registry[2]	The collection type of the measure submitted. (Each collection type has its own specification and specific benchmark used to determine how

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[1] A value of "claims" equates to the Medicare Part B claims measure collection type..
[2] A value of "registry" equates to the MIPS Clinical Quality Measure (CQM) collection type when the measure ID is 3 digits; it equates to the Qualified Clinical Data Registry (QCDR) measure when the measure ID is alpha-numeric.

				many points the quality measure earns.)
AJ	Quality Measure Score 2	Float	3.7	Measure score achieved for the corresponding MIPS Quality ID that contributed to the final score.
AK	Quality Measure ID 3	String	226	MIPS Quality ID for one of the quality measures that contributed to the final score.
AL	Quality Measure ID 3 Collection Type	String	electronicHealth Record[3]	The collection type of the measure submitted. (Each collection type has its own specification and specific benchmark used to determine how many points the quality measure earns.)
AM	Quality Measure Score 3	Float	8.2	Measure score achieved for the corresponding MIPS Quality ID that contributed to the final score.
AN	Quality Measure ID 4	String	236	MIPS Quality ID for one for the quality measures that contributed to the final score.
AO	Quality Measure ID 4 Collection Type	String	claims	The collection type of the measure submitted. (Each collection type has its own specification and specific benchmark used to determine how many points the quality measure earns.)
AP	Quality Measure Score 4	Float	7.1	Measure score achieved for the corresponding MIPS Quality ID that contributed to the final score.
AQ	Quality Measure ID 5	String	130	MIPS Quality ID for one of the quality measures that contributed to the final score.
AR	Quality Measure ID 5 Collection Type	String	claims	The collection type of the measure submitted. (Each collection type has its own specification and specific benchmark used to determine how many points the quality measure earns.)
AS	Quality Measure Score 5	Float	6.7	Measure score achieved for the corresponding MIPS Quality ID that contributed to the final score.
AT	Quality Measure ID 6	String	146	MIPS Quality ID for one of the quality measures that contributed to the final score.

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[3] A value of "electronicHealthRecord" equates to the electronic Clinical Quality Measure (eCQM) collection type.

AU	Quality Measure ID 6 Collection Type	String	claims	The collection type of the measure submitted. (Each collection type has its own specification and specific benchmark used to determine how many points the quality measure earns.)
AV	Quality Measure Score 6	Float	3.5	Measure score achieved for the corresponding MIPS Quality ID that contributed to the final score.
AW	Quality Measure ID 7	String	136	MIPS Quality ID for one of the quality measures that contributed to the final score.
AX	Quality Measure ID 7 Collection Type	String	claims	The collection type of the measure submitted. (Each collection type has its own specification and specific benchmark used to determine how many points the quality measure earns.)
AY	Quality Measure Score 7	Float	9.1	Measure score achieved for the corresponding MIPS Quality ID that contributed to the final score.
AZ	Quality Measure ID 8	String	236	MIPS Quality ID for one of the quality measures that contributed to the final score.
BA	Quality Measure ID 8 Collection Type	String	claims	The collection type of the measure submitted. (Each collection type has its own specification and specific benchmark used to determine how many points the quality measure earns.)
BB	Quality Measure Score 8	Float	6.0	Measure score achieved for the corresponding MIPS Quality ID that contributed to the final score.
BC	Quality Measure ID 9	String	139	MIPS Quality ID for one of the quality measures that contributed to the final score.
BD	Quality Measure ID 9 Collection Type	String	claims	The collection type of the measure submitted. (Each collection type has its own specification and specific benchmark used to determine how many points the quality measure earns.)
BE	Quality Measure Score 9	Float	4.9	Measure score achieved for the corresponding MIPS Quality ID that contributed to the final score.
BF	Quality Measure ID 10	String	321	MIPS Quality ID for one of the quality measures that contributed to the final score.

BG	Quality Measure ID 10 Collection Type	String	claims	The collection type of the measure submitted. (Each collection type has its own specification and specific benchmark used to determine how many points the quality measure earns.)
BH	Quality Measure Score 10	Float	8.3	Measure score achieved for the corresponding MIPS Quality ID that contributed to the final score.
BI	Quality Measure ID 11	String	326	MIPS Quality ID for one of the quality measures that contributed to the final score.
BJ	Quality Measure ID 11 Collection Type	String	claims	The collection type of the measure submitted. (Each collection type has its own specification and specific benchmark used to determine how many points the quality measure earns.)
BK	Quality Measure Score 11	Float	9.7	Measure score achieved for the corresponding MIPS Quality ID that contributed to the final score.
BL	Quality Measure ID 12	String	406	MIPS Quality ID for one of the quality measures that contributed to the final score.
BM	Quality Measure ID 12 Collection Type	String	claims	The collection type of the measure submitted. (Each collection type has its own specification and specific benchmark used to determine how many points the quality measure earns.)
BN	Quality Measure Score 12	Float	6.6	Measure score achieved for the corresponding MIPS Quality ID that contributed to the final score.
BO	Promoting Interoperability (PI) Category score	Float	78.99	The unweighted quality score is the sum of points achieved (including bonus points) divided by the sum of available points for the performance category. The unweighted score is represented as a percentage from 0 – 100, before it's multiplied by the performance category's weight.
BP	PI Reweighting (EUC)	Boolean	TRUE	Indicates if the clinician, group, or APM Entity was approved for reweighting of the Promoting Interoperability performance category due to extreme and uncontrollable circumstances. (Note: "True" indicates approval for

				reweighting, not whether the performance category was ultimately reweighted. Data submission overrides performance category reweighting on a category-by-category basis.)
BQ	PI Reweighting (Hardship Exception)	Boolean	TRUE	Indicates if the clinician or group had an approved MIPS Promoting Interoperability performance category hardship exception due to decertified Electronic Health Record (EHR) technology, extreme and uncontrollable circumstances, insufficient internet connectivity, or lack of control over the availability of certified EHR technology (CEHRT). (Note: "True" indicates approval for reweighting, not whether the performance category was ultimately reweighted. Data submission overrides performance category reweighting on a category-by-category basis.)
BR	PI Reweighting (Special Status or Clinician Type)	Boolean	TRUE	Indicates if the clinician or group qualified for an automatic reweighting from the Promoting Interoperability performance category due to special status or clinician type. (Note: "True" indicates approval for reweighting, not whether the performance category was ultimately reweighted. Data submission overrides performance category reweighting on a category-by-category basis.)
BS	CEHRT ID	String	15E123456789012	This is a unique identifier generated by the Office of the National Coordinator for Health Information Technology (ONC) and identifies a specific bundle of software or EHR. The CEHRT ID is a 15-character alpha-numeric string that can be found on the CHPL website. This is the CEHRT ID included in the data that contributed to the clinician's final score.
BT	PI Measure ID 1	String	PI_INFBLO_1	MIPS Promoting Interoperability ID for one of the Promoting Interoperability measures that contributed to the final score.
BU	PI Measure 1 Type	String	Required	Indicates if the measure is required, reported as an exclusion, or is an optional/bonus measure.

BV	PI Measure Score 1	Float	10	Measure score achieved for the corresponding MIPS Promoting Interoperability ID that contributed to the final score.
BW	PI Measure ID 2	String	PI_ONCDIR_1	MIPS Promoting Interoperability ID for one of the Promoting Interoperability measures that contributed to the final score.
BX	PI Measure 2 Type	String	Required	Indicates if the measure is required, reported as an exclusion, or is an optional/bonus measure.
BY	PI Measure Score 2	Float	2	Measure score achieved for the corresponding MIPS Promoting Interoperability ID that contributed to the final score.
BZ	PI Measure ID 3	String	PI_ONCACB_1	MIPS Promoting Interoperability ID for one of the Promoting Interoperability measures that contributed to the final score.
CA	PI Measure 3 Type	String	Bonus	Indicates if the measure is required, reported as an exclusion, or is an optional/bonus measure.
CB	PI Measure Score 3	Float	14	Measure score achieved for the corresponding MIPS Promoting Interoperability ID that contributed to the final score.
CC	PI Measure ID 4	String	PI_ HIE_5	MIPS Promoting Interoperability ID for one of the Promoting Interoperability measures that contributed to the final score.
CD	PI Measure 4 Type	String	Exclusion	Indicates if the measure is required, reported as an exclusion, or is an optional/bonus measure.
CE	PI Measure Score 4	Float	16	Measure score achieved for the corresponding MIPS Promoting Interoperability ID that contributed to the final score.
CF	PI Measure ID 5	String	PI_PEA_1	MIPS Promoting Interoperability ID for one of the Promoting Interoperability measures that contributed to the final score.
CG	PI Measure 5 Type	String	Required	Indicates if the measure is required, reported as an exclusion, or is an optional/bonus measure.
CH	PI Measure Score 5	Float	1	Measure score achieved for the corresponding MIPS Promoting Interoperability ID that contributed to the final score.

CI	PI Measure ID 6	String	PI_PHCDRR_4	MIPS Promoting Interoperability ID for one of the Promoting Interoperability measures that contributed to the final score.
CJ	PI Measure 6 Type	String	Required	Indicates if the measure is required, reported as an exclusion, or is an optional/bonus measure.
CK	PI Measure Score 6	Float	10	Measure score achieved for the corresponding MIPS Promoting Interoperability ID that contributed to the final score.
CL	PI Measure ID 7	String	PI_PPHI_1	MIPS Promoting Interoperability ID for one of the Promoting Interoperability measures that contributed to the final score.
CM	PI Measure 7 Type	String	Required	Indicates if the measure is required, reported as an exclusion, or is an optional/bonus measure.
CN	PI Measure Score 7	Float	2	Measure score achieved for the corresponding MIPS Promoting Interoperability ID that contributed to the final score.
CO	PI Measure ID 8	String	PI_HIE_4	MIPS Promoting Interoperability ID for one of the Promoting Interoperability measures that contributed to the final score.
CP	PI Measure 8 Type	String	Required	Indicates if the measure is required, reported as an exclusion, or is an optional/bonus measure.
CQ	PI Measure Score 8	Float	4	Measure score achieved for the corresponding MIPS Promoting Interoperability ID that contributed to the final score.
CR	PI Measure ID 9	String	PI_LVITC_2	MIPS Promoting Interoperability ID for one of the Promoting Interoperability measures that contributed to the final score.
CS	PI Measure 9 Type	String	Required	Indicates if the measure is required, reported as an exclusion, or is an optional/bonus measure.
CT	PI Measure Score 9	Float	8	Measure score achieved for the corresponding MIPS Promoting Interoperability ID that contributed to the final score.
CU	PI Measure ID 10	String	PI_HIE_1	MIPS Promoting Interoperability ID for one of the Promoting Interoperability measures that contributed to the final score.

CV	PI Measure 10 Type	String	Required	Indicates if the measure is required, reported as an exclusion, or is an optional/bonus measure.
CW	PI Measure Score 10	Float	2	Measure score achieved for the corresponding MIPS Promoting Interoperability ID that contributed to the final score.
CX	PI Measure ID 11	String	PI_PHCDRR_3	MIPS Promoting Interoperability ID for one of the Promoting Interoperability measures that contributed to the final score.
CY	PI Measure 11 Type	String	Required	Indicates if the measure is required, reported as an exclusion, or is an optional/bonus measure.
CZ	PI Measure Score 11	Float	10	Measure score achieved for the corresponding MIPS Promoting Interoperability ID that contributed to the final score.
DA	Improvement Activities (IA) Category Score	Float	40	The score received for the improvement activities performance category is based on all the activities the clinician or group implemented and that contributed to the final score.
DB	IA Reweighting (EUC)	Boolean	TRUE	Indicates if the clinician, group, or APM Entity was approved for reweighting of the improvement activities performance category due to extreme and uncontrollable circumstances. (Note: "TRUE" indicates approval for reweighting, not whether the performance category was ultimately reweighted. Data submission overrides performance category reweighting on a category-by-category basis.)
DC	IA Credit	Boolean	FALSE	This data element will show as FALSE for everyone because this study (awarding credit in the improvement activities performance category) concluded after the 2019 performance year.
DD	IA Measure ID 1	String	IA_PM_16	MIPS Improvement Activity ID for one of the improvement activities that contributed to the final score.
DE	IA Measure Score 1	Float	10	Activity score achieved for the corresponding MIPS Improvement Activity ID that contributed to the final score.

DF	IA Measure ID 2	String	IA_PM_21	MIPS Improvement Activity ID for one of the improvement activities that contributed to the final score.
DG	IA Measure Score 2	Float	10	Activity score achieved of the corresponding MIPS Improvement Activity ID that contributed to the final score.
DH	IA Measure ID 3	String	IA_PSPA_1	MIPS Improvement Activity ID for one of the improvement activities that contributed to the final score.
DI	IA Measure Score 3	Float	10	Activity score achieved for the corresponding MIPS Improvement Activity ID that contributed to the final score.
DJ	IA Measure ID 4	String	IA_ERP_2	MIPS Improvement Activity ID for one of the improvement activities that contributed to the final score.
DK	IA Measure Score 4	Float	10	Activity score achieved for the corresponding MIPS Improvement Activity ID that contributed to the final score.
DL	Cost Category Score	Float	20	The unweighted cost category score is the sum of points achieved on the attributed cost measure(s) divided by the sum of available points for the performance category. The unweighted score is represented as a percentage from 0 – 100, before it's multiplied by the performance category's weight.
DM	Cost Reweighting (EUC)	Boolean	TRUE	Indicates if the clinician or group was approved for reweighting of the cost performance category due to extreme and uncontrollable circumstances. (Note: Unlike other performance categories, clinicians can't override approved cost reweighting.)
DN	Cost Measure ID 1	String	TPCC_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
DO	Cost Measure Achievement Points 1	Float	5.7	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
DP	Cost Measure ID 2	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.

DQ	Cost Measure Achievement Points 2	Float	7.2	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
DR	Cost Measure ID 3	String	COST_ACOPD_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
DS	Cost Measure Achievement Points 3	Float	5.4	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
DT	Cost Measure ID 4	String	COST_CRR_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
DU	Cost Measure Achievement Points 4	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
DV	Cost Measure ID 5	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
DW	Cost Measure Achievement Points 5	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
DX	Cost Measure ID 6	String	COST_D_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
DY	Cost Measure Achievement Points 6	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
DZ	Cost Measure ID 7	String	COST_EOPCI_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
EA	Cost Measure Achievement Points 7	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
EB	Cost Measure ID 8	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
EC	Cost Measure Achievement Points 8	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
ED	Cost Measure ID 9	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
EE	Cost Measure Achievement Points 9	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
EF	Cost Measure ID 10	String	COST_FIHR_1	MIPS Cost ID for one of the cost measures that contributed to the final score.

EG	Cost Measure Achievement Points 10	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
EH	Cost Measure ID 11	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
EI	Cost Measure Achievement Points 11	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
EJ	Cost Measure ID 12	String	COST_HAC_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
EK	Cost Measure Achievement Points 12	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
EL	Cost Measure ID 13	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
EM	Cost Measure Achievement Points 13	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
EN	Cost Measure ID 14	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
EO	Cost Measure Achievement Points 14	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
EP	Cost Measure ID 15	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
EQ	Cost Measure Achievement Points 15	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
ER	Cost Measure ID 16	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
ES	Cost Measure Achievement Points 16	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
ET	Cost Measure ID 17	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
EU	Cost Measure Achievement Points 17	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
EV	Cost Measure ID 18	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.

EW	Cost Measure Achievement Points 18	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
EX	Cost Measure ID 19	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
EY	Cost Measure Achievement Points 19	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed .to the final score.
EZ	Cost Measure ID 20	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
FA	Cost Measure Achievement Points 20	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
FB	Cost Measure ID 21	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
FC	Cost Measure Achievement Points 21	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
FD	Cost Measure ID 22	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
FE	Cost Measure Achievement Points 22	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
FF	Cost Measure ID 23	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
FG	Cost Measure Achievement Points 23	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.
FH	Cost Measure ID 24	String	MSPB_1	MIPS Cost ID for one of the cost measures that contributed to the final score.
FI	Cost Measure Achievement Points 24	Float	10	Cost measure achievement points for the corresponding MIPS Cost ID that contributed to the final score.

Version History

Date	Change Description
05/06/2024	Original version