

FY 1994 Prospective Payment System Payment Impact File:

This file contains data used to estimate FY 1994 payments under Medicare's prospective payment systems (PPS) for hospitals' operating and capital costs. The data are taken from various sources, including the Provider Specific File, the PPS-VII and PPS-VIII Minimum Data Sets, and prior impact files. The data set is abstracted from an internal file used for the impact analysis of the changes to PPS published in the Federal Register. This file is available for release one month after the PPS Final Rule is published in the Federal Register, which generally occurs the first week of September. FY 1994 PPS PAYMENT IMPACT FILE

File Pos.FormatTitleDescription

- 1.44.Average daily census (ADC)From cost reports
- 6.94.Number of bedsFrom cost reports
- 11.108.Medicare dischargesFrom 1992 MEDPAR file (adjusted for transfer cases)
- 20.256.ACCase Mix IndexVersion 11 GROUPEE
- 27.236.Operating Cost of Living AdjustmentApplied to providers in Alaska and Hawaii for operating PPS
- 34.296.CCapital Cost of Living AdjustmentApplied to payments to providers in Alaska and Hawaii for capital PPS
- 41.499.CCapital Outlier PercentageEstimated capital outlier payments as a percentage of Federal capital DRG payments
- 51.507.CCapital cost-to-charge ratioFrom Provider Specific File, ratio of Medicare capital costs to Medicare covered charges
- 59.679.DDisproportionate share (DSH) patient percentageAs determined from cost report and Social Security Administration (SSA) data
- 69.779.CCapital DSH adjustment factor Applied to capital PPS payments
- 79.879.DOperating DSH adjustment factor Applied to operating PPS payments
- 89.8486.Hospital's final year ending dateFrom cost report
- 96.1038.2Hospital-specific rateHigher of 1982 or 1987 hospital-specific rates, updated through FY 1994, and adjusted for case-mix index. (Data for Sole Community Hospitals and Medicare-Dependent, Small Rural Hospitals only)
- 105.10884.Pre-FY 1994 Metropolitan statistical area (MSA) MSA where hospital is actually located, prior to new MSA definitions resulting from 1990 census. Rural areas designated by two digit SSA State codes.
- 110.11354.FY 1994 MSAXMSA where hospital is actually located after new MSA definitions resulting from 1990 census (see above).
- 115.11854.Post-reclassification FY 1994 MSA (wage index)MSA used for wage index assignment after reclassification by the Medicare Geographic Classification Review Board (MGCRB).
- 120.12354.Pre-reclassification FY 1994 MSA (standardized amount)MSA used for standardized amount assignment after reclassification by the MGCRB.
- 125.1317.Operating cost-to-charge ratioFrom Provider Specific file, ratio of Medicare operating costs to Medicare covered charges
- 133.1419.DOperating outlier percentageEstimated operating outlier payments as a percentage of operating DRG payments
- 141.14956.Provider Number(s) character provider number, first two digits identify the State
- 151.1522.Provider Type 0 = Short term PPS hospital
- 1 = Sole community hospital
- 7 = Rural Referral Center
- 8 = Indian hospital
- 11 = Sole community hospital and Rural Referral Center
- 12 = Alcohol hospital
- 14 = Medicare-dependent, small rural hospital15 = Medicare-dependent, small rural hospital/referral center
- 154.1607.5 Resident-to-ADC ratioUsed to calculate the indirect medical education adjustment (IME) for capital PPS payments
- 16251.Reclassification statusIndicates hospitals reclassified by the MGCRB
- N = Not reclassified
- R = Reclassified for the standardized payment
- W = Reclassified for the wage index
- B = Reclassified for the standard payment and the wage index
- L = Reclassified under Section 1886(d)(8) of the Social Security Act
- 164.1652.Post-reclassification regionRegion used to assign the regional standardized amounts after reclassification by the MGCRB
- 1 = New England
- 2 = Middle Atlantic
- 3 = South Atlantic
- 4 = East North Central
- 5 = East South Central
- 6 = West North Central
- 7 = West South Central
- 8 = Mountain
- 9 = Pacific
- 40 = Puerto Rico
- 167.1682.Pre-reclassification RegionRegion used to assign the regional standardized amounts prior to reclassification by the MGCRB (see post-reclassification region for key)
- 170.1756.RResident-to-bed ratioUsed to determine IME factor for operating PPS payments
- 177.1859.CCapital IME adjustmentBased on resident-to-ADC ratio
- 187.1959.DOperating IME adjustmentBased on resident-to-bed ratio
- 197.20256.Pre-FY 1994 urban/rural locationPrior to new MSA definitions based on 1990 census
- LURBAN = Large urban area
- OURBAN = Other urban area
- RURAL = Rural area
- 204.20956.FY 1994 urban/rural locationAfter new MSA definitions based on 1990 census (see pre-FY 1994 urban/rural location for key)
- 211.21656.Post-reclassification urban/rural statusUsed to assign the standardized amounts based on reclassifications by the MGCRB
- 218.2236.AMedicare utilization rateMedicare days as a percentage of total inpatient days. (Data not available for all hospitals)
- 228.2329.CCapital wage indexUsed to determine geographic adjustment factor
- 235.2439.DOperating wage indexApplied to labor-share of standardized amount