

CY 2011 ESRD PPS Proposed Rule Provider Level Impact File

This file contains the data used to assess the impact of the proposed ESRD PPS

| Column | Title | Description |
|--------|-----------------|--|
| A | Provider Number | Six character OSCAR Provider Number (CMS Certification Number). |
| B | Transition | Identifies facilities that are estimated to opt out of transition 0=Facility goes through transition 1=Facility elects to opt out of transition |
| C | Treatments | Hemo-equivalent treatments |
| D | PMT_CRSB | Estimated total CY 2011 Medicare Allowable Payments (MAP) under the current system basic case-mix adjusted composite payment system |
| E | PMT_Transition | Estimated total CY 2011 MAP assuming that all providers transition (75% PMT_CRSB and 25% PMT_100% PPS). |
| F | PMT_Option | Estimated total CY 2011 MAP for a payment system based on option to elect 100% PPS in first year (Column B identifies facilities that are estimated to elect 100% PPS in first year). |
| G | PMT_TBN | Estimated total CY 2011 MAP for a payment system based on option to elect 100% PPS in first year (Column B identifies facilities that are estimated to elect 100% PPS in first year) and with transition budget neutrality factor applied. |
| H | PMT_100%PPS | Estimated total CY 2011 MAP assuming that all providers are paid 100% ESRD PPS in first year of transition. |
| I | Rural/Urban | Identifies urban or rural status based on geographic location. 1=Rural 2=Urban |
| J | Provider Type | 1=Hospital-based 2=Freestanding |
| K | Size | Identifies size of facility based on total number of hemo-equivalent treatments (including treatments for non-Medicare patients) 1=Less than 3,000 treatments 2=3,000 to 9,999 treatments 3=More than 10,000 treatments |
| L | Low Volume | Identifies facilities that qualify for low-volume adjustment 1=Yes 2=No |
| M | Ownership | Identifies type of ownership by: 1=Large dialysis organization 2=Regional chain 3=Independent 4=Hospital-based 5=Unknown |

| Column | Title | Description |
|--------|-----------------------|--|
| N | Census Region | Identifies location of facility by Census Region |
| O | State | Identifies whether facility is in Alaska or Hawaii AK=Alaska HI=Hawaii Other=State other than Alaska or Hawaii |
| P | Retained Exception | Identifies facilities that choose to retain their exception rate (either IEF or atypical) rather than be paid under the current basic case-mix adjusted composite payment system. 1=Yes 2=No |
| Q | Pediatric | Identifies percentage of pediatric patients 1=Less than 2% 2=From 2% to 19% 3=From 20% to 49% 4=50% or more |
| R | State | Identifies state where facility located using 2-digit alpha state abbreviations |
| S | Profit non | Identifies profit or non-profit status of facility 1=Profit 2=Non-profit |
| T | CBSA | Up to five character code designating the provider's CBSA location |
| U | CRSB_wage_index | Wage index values under current case-mix adjusted composite payment system |
| V | EB_wage_index | Wage index values under proposed ESRD PPS |
| W | EB_payment multiplier | Facility's average payment adjustment based on proposed patient-level and facility-level adjusters (does not include wage adjustment) |