

DATA SOURCE AND METHODOLOGY – CMS PROGRAM STATISTICS

SECTION: MEDICARE PROVIDERS

OVERVIEW

The Office of Enterprise Data and Analytics, within the Centers for Medicare & Medicaid Services (CMS), has developed the CMS Program Statistics, an information product which is replacing the Medicare and Medicaid Statistical Supplement. The CMS Program Statistics is an online statistical report that includes tables describing characteristics of the Medicare-covered populations, use of services, and expenditures under these programs, as well as Medicare providers serving beneficiaries.

The Medicare Providers Section tables include counts of Medicare certified institutional providers (e.g., hospitals, skilled nursing facilities, home health agencies, hospices, etc.), nationally and by State, as well as counts of non-institutional providers (i.e., physicians, non-physicians, and suppliers), by specialty and State.

This document provides an overview of the data and methods used to develop the various tables in this section and will be updated as needed.

DATA SOURCE

The data reported in the Medicare Providers Section tables are based upon data available from the following sources:

- Institutional Provider Tables – The Provider of Services (POS) File, a file containing data on characteristics of hospitals and other types of healthcare facilities, and one of the best sources for information on Medicare-approved institutional providers. Detailed information on the POS file is available here: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Downloadable-Public-Use-Files/Provider-of-Services/index.html>
- Non-Institutional Provider Tables – CMS Chronic Conditions Data Warehouse (CCW), a database with 100% of Medicare physician/non-physician/supplier fee-for-service claims data. Detailed information on the CCW is available from the CCW website, www.ccwdata.org.

METHODOLOGY

Institutional providers are counted and reported in the Medicare Providers Section if they are active and Medicare-certified in the reporting calendar year. Active status and Medicare certification are based on data residing in the POS file.

Non-institutional provider counts reported in the Medicare Providers Section are derived from calendar year Medicare fee-for-service Part B claims (claims data for Medicare Advantage & Other Health Plan enrollees are currently unavailable for the CMS Program Statistics). Services provided by participating physicians, non-participating physicians, non-physicians, and suppliers are reflected on Part B claims. Physicians/suppliers may be counted in more than a single specialty and in more than a single state.