Chronic Conditions Warehouse

Your source for national CMS Medicare and Medicaid research data

CODEBOOK:

Million Hearts® Cardiovascular Disease (CVD) Risk Reduction Model Medicare Data Files

MAY 2023 | VERSION 1.0
## Revision Log

<table>
<thead>
<tr>
<th>Date</th>
<th>Changed by</th>
<th>Revisions</th>
<th>Version</th>
</tr>
</thead>
<tbody>
<tr>
<td>May 2023</td>
<td>K. Schneider</td>
<td>Initial release of codebook</td>
<td>1.0</td>
</tr>
</tbody>
</table>
Tips on Navigating the Codebook

This document is a detailed codebook that describes each variable in the Million Hearts® CVD Risk Reduction Model Medicare Data research files. Because the files have many variables, we have included several ways for users to quickly find the information they need:

• A complete listing of all variables in the files, in alphabetical order based on their SAS variable names.

• Individual entries for each variable that contain a short description of the variable, the possible values for the variable, and, in many cases, notes that discuss how the variable was constructed and should be used.

We have included hyperlinks throughout the codebook to make it easier for analysts to navigate between the table of contents and the detailed entries for the individual variables:

• Clicking on any variable name in the Table of Contents will take you to the detailed description for that variable.

• From the detailed description for any individual variable, clicking on the ^Back to TOC^ link after each variable description will take you back to the Table of Contents.
Table of Contents

This section of the codebook contains a list of all variables in alphabetical order based on the SAS variable name.

Quick links: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

Variable Details

ACCURACY_ATTESTATION................................................................. 1
ACTIVATION_DATE ........................................................................... 2
ACTIVITY_DATE ............................................................................. 3
ACTIVITY_END_DATE ..................................................................... 4
ADDRESS_LINE_1 ......................................................................... 5
ADDRESS_LINE_2 ......................................................................... 6
ALIGNED .......................................................................................... 7
BASELINE_DATE ............................................................................ 8
BASELINE_GROUP ......................................................................... 9
BASELINE_SCORE ......................................................................... 10
BENE_ID ........................................................................................ 11
BILLING_TIN ................................................................................ 12
CCNS ............................................................................................... 13
CITY ................................................................................................ 14
CODE ............................................................................................... 15
CREATE_DATE ............................................................................... 16
DEACTIVATION_DATE ................................................................... 17
ELIGIBLE ....................................................................................... 18
FILE_COUNT ................................................................................ 19
FIRST_NAME ................................................................................ 20
FOLLOWUP_ATTESTATION .......................................................... 21
GROUP_TYPE ................................................................................ 22
INSERT_DATE ................................................................................ 23
IS_ACTIVE ...................................................................................... 24
IS_BASELINE_COMPLETE ............................................................. 25
IS_MEDICARE_PARTB ................................................................... 26
LAST_MODIFIED_DATE ................................................................. 27
LAST_NAME ................................................................................... 28
MODIFIER ...................................................................................... 29
NPI ................................................................................................. 30
NPIS ............................................................................................... 31
PATIENT_DOB ............................................................................... 32
PATIENT_ETHNICITY ..................................................................... 33
PATIENT_GENDER ......................................................................... 34
PATIENT_RACE ............................................................................... 35
Variable Details

This section of the codebook contains one entry for each variable in the Million Hearts® CVD Risk Reduction Model Medicare Data files. Each entry contains variable details to facilitate understanding and use of the variables.

**ACCURACY_ATTESTATION**

**LABEL:** Practitioner’s Accuracy of Attestation

**DESCRIPTION:** Practitioner’s accuracy of attestation. This variable addresses the question, “Has the practitioner attested to accuracy?”

**SHORT NAME:** ACCURACY_ATTESTATION

**LONG NAME:** ACCURACY_ATTESTATION

**TYPE:** CHAR

**LENGTH:** 1

**FILE(S):** Visit

**SOURCE:** Million Hearts Data Registry

**VALUES:** Y = Yes
       N = No

**COMMENT:** —

^ Back to TOC ^
**ACTIVATION_DATE**

**LABEL:** Date the Provider Joined the Program

**DESCRIPTION:** Date the provider joined the program.

**SHORT NAME:** ACTIVATION_DATE

**LONG NAME:** ACTIVATION_DATE

**TYPE:** DATE

**LENGTH:** 8

**FILE(S):** NPI

**SOURCE:** Million Hearts Data Registry

**VALUES:** Ex — 09/18/2016

**COMMENT:** Formatted as MMDDYY10 in SAS
**ACTIVITY_DATE**

**LABEL:** Encounter/Procedure/Diagnosis/Lab/Medication Start or Occurrence Date

**DESCRIPTION:** Encounter/Procedure/Diagnosis/Lab/Medication start or occurrence date.

**SHORT NAME:** ACTIVITY_DATE

**LONG NAME:** ACTIVITY_DATE

**TYPE:** DATE

**LENGTH:** 8

**FILE(S):** Clinical (final and raw)

**SOURCE:** Million Hearts Data Registry

**VALUES:** Ex — 07/10/2020

**COMMENT:** Formatted as MMDDYY10 in SAS

[^ Back to TOC ^]
**ACTIVITY_END_DATE**

**LABEL:** Encounter/Procedure/Diagnosis End date

**DESCRIPTION:** Encounter/Procedure/Diagnosis end date.

**SHORT NAME:** ACTIVITY_END_DATE

**LONG NAME:** ACTIVITY_END_DATE

**TYPE:** DATE

**LENGTH:** 8

**FILE(S):** Clinical (final and raw)

**SOURCE:** Million Hearts Data Registry

**VALUES:** Ex — 07/10/2020

**COMMENT:** Formatted as MMDDYY10 in SAS

[^ Back to TOC ^]
**ADDRESS_LINE_1**

**LABEL:** Practice's Address (line 1)

**DESCRIPTION:** Practice's address (line 1).

**SHORT NAME:** ADDRESS_LINE_1

**LONG NAME:** ADDRESS_LINE_1

**TYPE:** CHAR

**LENGTH:** 100

**FILE(S):** Practice

**SOURCE:** Million Hearts Data Registry

**VALUES:** Ex — 12345 MAIN STREET

**COMMENT:** This field is the street address where billing TIN is located. There is also a second address line practices could use if needed (ADDRESS_LINE_2).
**ADDRESS_LINE_2**

**LABEL:**   Practice's Address (line 2)

**DESCRIPTION:**  Practice's address (line 2).

**SHORT NAME:**  ADDRESS_LINE_2

**LONG NAME:**  ADDRESS_LINE_2

**TYPE:**  CHAR

**LENGTH:**  100

**FILE(S):**  Practice

**SOURCE:**  Million Hearts Data Registry

**VALUES:**  Ex — Suite 100, or null/missing

**COMMENT:**  This is the second line of an address, used only if needed. Refer to the first portion of the street address in ADDRESS_LINE_1.
**LABEL:** Indication of Patient’s Attribution to the Practice (Y or N)

**DESCRIPTION:** Indication of patient’s attribution to the practice (Y or N).

**SHORT NAME:** ALIGNED

**LONG NAME:** ALIGNED

**TYPE:** CHAR

**LENGTH:** 1

**FILE(S):** Alignment (final and EVAA cycle files)

**SOURCE:** Million Hearts Data Registry

**VALUES:**
Y = Yes
N = No
Null/missing

**COMMENT:** The (beneficiary) Enrollment, Validation, Alignment, and Adjudication (EVAA) analysis was performed by the Million Hearts data contractor. The Million Hearts model employed a complex EVAA analytic process. During this process, each beneficiary record submitted by providers to the Million Hearts registry was validated against claims data, and beneficiary alignments and program eligibilities were determined. The EVAA process occurred semiannually, each October and April. There was a total of 10 EVAA analytical cycles, between October 2017 through April 2022 (two per year for the five years of the project).
**BASELINE_DATE**

**LABEL:** Patient's Baseline Date

**DESCRIPTION:** Patient's baseline date.

**SHORT NAME:** BASELINE_DATE

**LONG NAME:** BASELINE_DATE

**TYPE:** DATE

**LENGTH:** 8

**FILE(S):** Visit

**SOURCE:** Million Hearts Data Registry

**VALUES:** Ex — 10/12/2018

**COMMENT:** Formatted as MMDDYY10 in SAS
BASELINE_GROUP

LABEL: Patient's Baseline Group (Low, Medium, High)

DESCRIPTION: Patient's baseline group (low, medium, high).

SHORT NAME: BASELINE_GROUP

LONG NAME: BASELINE_GROUP

TYPE: CHAR

LENGTH: 10

FILE(S): Visit

SOURCE: Million Hearts Data Registry

VALUES: LOW MEDIUM HIGH Null/missing

COMMENT: This field is the stratified CVD risk group derived from the BASELINE_SCORE. For the purposes of the Million Hearts® Cardiovascular Disease Risk Reduction Model, CMS defined “high-risk” beneficiaries as individuals with an ACC/AHA 10-year ASCVD risk score of greater than 30%. The ACC/AHA guidelines still hold true that all individuals should have a risk score less than 7.5%. CMS was attempting to intervene on the critically high-risk group (reference https://innovation.cms.gov/files/x/mhvcdrrm-faqs.pdf).
**BASELINE_SCORE**

**LABEL:** Patient's Baseline ASCVD Score

**DESCRIPTION:** Patient's baseline atherosclerotic cardiovascular disease (ASCVD) score.

**SHORT NAME:** BASELINE_SCORE

**LONG NAME:** BASELINE_SCORE

**TYPE:** CHAR

**LENGTH:** 10

**FILE(S):** Visit

**SOURCE:** Million Hearts Data Registry

**VALUES:** Ex — 21.7000, or null/missing

**COMMENT:** This field is the ACC Risk score calculated from information during the visit. The higher the score, the greater the ASCVD risk. The data file also includes a categorical variable that groups this score into either high, medium, or low risk (BASELINE_GROUP). After the baseline assessment, subsequent provider assessments of patient risk are in the RISK_SCORE field.

[^Back to TOC^]
### BENE_ID

**LABEL:** Encrypted CCW Beneficiary ID  

**DESCRIPTION:** The unique CCW identifier for a beneficiary.  

The CCW assigns a unique beneficiary identification number to each individual who receives Medicare and/or Medicaid and uses that number to identify an individual’s records in all CCW data files (e.g., Medicare claims and enrollment, T-MSIS claims, and MDS assessment data).  

This number does not change during a beneficiary’s lifetime, and CCW uses each number only once.  

The BENE_ID is specific to the CCW and is not applicable to any other identification system or data source.

**SHORT NAME:** BENE_ID  

**LONG NAME:** BENE_ID  

**TYPE:** CHAR  

**LENGTH:** 15  

**FILE(S):**  

- Clinical (final and raw)  
- Visit  
- Demographic  
- Alignment (final and EVAA cycle files)

**SOURCE:** CCW  

**VALUES:** —  

**COMMENT:** —
**BILLING_TIN**

**LABEL:**  Practice's Billing TIN

**DESCRIPTION:**  Practice's billing federal Taxpayer Identification Number (TIN).

**SHORT NAME:**  BILLING_TIN

**LONG NAME:**  BILLING_TIN

**TYPE:**  CHAR

**LENGTH:**  9

**FILE(S):**  Practice

**SOURCE:**  Million Hearts Data Registry

**VALUES:**  —

**COMMENT:**  Identifies the practice to whom payment was made for the Million Hearts Model. If attempting to join this field to Medicare carrier claims files in the CCW, the provider Tax ID field is called TAX_NUM.
CCNS

LABEL: List of CMS Certification Numbers (Facility Numbers) for the Practice

DESCRIPTION: List of CMS Certification Numbers (facility numbers) for the practice.

SHORT NAME: CCNS

LONG NAME: CCNS

TYPE: CHAR

LENGTH: 4000

FILE(S): Practice

SOURCE: Million Hearts Data Registry

VALUES: EX — 15161718,15161719
Null/missing

COMMENT: The first six digits of each CMS Certification Number (CCN) are the facility number; additional digits (i.e., positions 7–13) may be used to distinguish between campuses for multiple campus hospitals. This field could be missing or have one or more CCNs, separated by a comma.

Note that if attempting to join to Medicare claims files in the CCW, the 6-digit CCN is called the provider number (PRVDR_NUM).
### CITY

**LABEL:** Practice's City  

**DESCRIPTION:** Practice's city.  

**SHORT NAME:** CITY  

**LONG NAME:** CITY  

**TYPE:** CHAR  

**LENGTH:** 100  

**FILE(S):** Practice  

**SOURCE:** Million Hearts Data Registry  

**VALUES:** Ex — BRONX  

**COMMENT:** This field is the city where billing TIN is located.
**CODE**

**LABEL:** Code Used to Document the Service

**DESCRIPTION:** Code used to document the service. The ACC/AHA risk calculation used clinical information submitted by the practice to ascertain CVD risk. The risk factors are documented for each patient. There is one record in the file for each patient and each risk factor that was assessed on a given date (i.e., the ACTIVITY_DATE).

**SHORT NAME:** CODE

**LONG NAME:** CODE

**TYPE:** CHAR

**LENGTH:** 20

**FILE(S):** Clinical (final and raw)

**SOURCE:** Million Hearts Data Registry

**VALUES:** Within the Clinical_Final file the values are:

- AFB.NO = Whether or not the patient has atrial fibrillation
- AFB.YES = Whether or not the patient has atrial fibrillation
- ASP.NO = Whether or not the patient is taking aspirin
- ASP.YES = Whether or not the patient is taking aspirin
- DBT.NO = Whether or not the patient has diabetes
- DBT.YES = Whether or not the patient has diabetes
- HDL = High-density lipoprotein
- LDL = Low-density lipoprotein
- SBP = Systolic blood pressure
- SCM = Stress cardiomyopathy
- SMK.NO = Smoking — whether or not the patient is a smoker
- SMK.YES = Smoking — whether or not the patient is a smoker
- STT.NO = Statin — whether the patient is on a Statin
- STT.YES = Statin — whether the patient is on a Statin
- TCH = Total cholesterol
- THY.NO = Thyroid
- THY.YES = Thyroid

**COMMENT:** The values above are the cleaned and standardized values that populate the final clinical file. In the raw clinical file, values are a mixture of non-standardized values which may include diagnosis codes, values from test results, free-form text, and other unknown values.
### CREATE_DATE

**LABEL:** Date the Record was Created  
**DESCRIPTION:** Date when the record was created.  
**SHORT NAME:** CREATE_DATE  
**LONG NAME:** CREATE_DATE  
**TYPE:** DATE  
**LENGTH:** 8  
**FILE(S):** Demographic  
Clinical (final and raw)  
Visit  
**SOURCE:** Million Hearts Data Registry  
**VALUES:** Ex — 10/12/2018  
**COMMENT:** Formatted as MMDDYY10 in SAS
**DEACTIVATION_DATE**

**LABEL:** Date the Provider Left the Program

**DESCRIPTION:** Date the provider left the program.

**SHORT NAME:** DEACTIVATION_DATE

**LONG NAME:** DEACTIVATION_DATE

**TYPE:** DATE

**LENGTH:** 8

**FILE(S):** NPI

**SOURCE:** Million Hearts Data Registry

**VALUES:** Ex — 10/12/2018

**COMMENT:** Formatted as MMDDYY10 in SAS
**ELIGIBLE**

**LABEL:** Indication of Patient's Eligibility

**DESCRIPTION:** Indication of patient's eligibility.

**SHORT NAME:** ELIGIBLE

**LONG NAME:** ELIGIBLE

**TYPE:** CHAR

**LENGTH:** 1

**FILE(S):** Alignment (final and EVAA cycle files)

**SOURCE:** Million Hearts Data Registry

**VALUES:**
- Y = Yes
- N = No
- Null/missing

**COMMENT:** If ELIGIBLE variable value is “N” then the reason code for ineligibility is documented in the REASON_CODE.
**FILE_COUNT**

**LABEL:** Number of Files Submitted for the Practice

**DESCRIPTION:** Number of files submitted to the Million Hearts Data Registry (MHDR) for the practice.

**SHORT NAME:** FILE_COUNT

**LONG NAME:** FILE_COUNT

**TYPE:** CHAR

**LENGTH:** 10

**FILE(S):** Practice

**SOURCE:** Million Hearts Data Registry

**VALUES:** 0, 3

**COMMENT:** Practices were to submit demographic/clinical data for patients to MHDR.

[^ Back to TOC ^]
**FIRST_NAME**

**LABEL:** Provider's First Name

**DESCRIPTION:** Provider's first name.

**SHORT NAME:** FIRST_NAME

**LONG NAME:** FIRST_NAME

**TYPE:** CHAR

**LENGTH:** 100

**FILE(S):** NPI

**SOURCE:** Million Hearts Data Registry

**VALUES:** —

**COMMENT:** —
**FOLLOWUP_ATTESTATION**

**LABEL:** Practitioner's Attestation to Follow-up

**DESCRIPTION:** Practitioner's attestation to follow-up. This variable addresses the question, “Has the practitioner attested to follow-up?”

**SHORT NAME:** FOLLOWUP_ATTESTATION

**LONG NAME:** FOLLOWUP_ATTESTATION

**TYPE:** CHAR

**LENGTH:** 1

**FILE(S):** Visit

**SOURCE:** Million Hearts Data Registry

**VALUES:**
- Y = Yes
- N = No

**COMMENT:** –
GROUP_TYPE

LABEL: Practice Group Type

DESCRIPTION: Practice group type.

SHORT NAME: GROUP_TYPE

LONG NAME: GROUP_TYPE

TYPE: CHAR

LENGTH: 100

FILE(S): Practice

SOURCE: Million Hearts Data Registry

VALUES: CONTROL INTERVENTION

COMMENT: —
**INSERT_DATE**

**LABEL:** Date the Record was Created  

**DESCRIPTION:** The date when the practice or provider record was created.  

**SHORT NAME:** INSERT_DATE  

**LONG NAME:** INSERT_DATE  

**TYPE:** DATE  

**LENGTH:** 8  

**FILE(S):** Practice  
NPI  

**SOURCE:** Million Hearts Data Registry  

**VALUES:** Ex — 06/15/2018  

**COMMENT:** This field is in two files. Within the practice file, it is populated with the date the practice record was created; within the NPI file, it is the date the provider record was created.

[^ Back to TOC ^]
IS_ACTIVE

LABEL:  Active Practice (Y) or Inactive Practice (N)

DESCRIPTION:  Active practice or inactive practice.

SHORT NAME:  IS_ACTIVE

LONG NAME:  IS_ACTIVE

TYPE:  CHAR

LENGTH:  1

FILE(S):  Practice

SOURCE:  Million Hearts Data Registry

VALUES:  Y = Yes (active practice)
          N = No (inactive practice)

COMMENT:  —
**IS_BASELINE_COMPLETE**

**LABEL:** Indication of Completion of Beneficiary Record in the Registry (Y or N)

**DESCRIPTION:** Indication of completion of beneficiary record in the registry (Y or N).

**SHORT NAME:** IS_BASELINE_COMPLETE

**LONG NAME:** IS_BASELINE_COMPLETE

**TYPE:** CHAR

**LENGTH:** 1

**FILE(S):** Alignment (final and EVAA cycle files)

**SOURCE:** Million Hearts Data Registry

**VALUES:**
- Y = Yes
- N = No

**COMMENT:** —
**IS_MEDICARE_PARTB**

**LABEL:** Identify if the Patient is Enrolled in Medicare Part B

**DESCRIPTION:** Identify if the patient is enrolled in Medicare Part B at the time of enrollment in the project.

**SHORT NAME:** IS_MEDICARE_PARTB

**LONG NAME:** IS_MEDICARE_PARTB

**TYPE:** CHAR

**LENGTH:** 1

**FILE(S):** Demographic

**SOURCE:** Million Hearts Data Registry

**VALUES:**

- Y = Yes
- N = No

**COMMENT:** –
**LAST_MODIFIED_DATE**

**LABEL:** Date the Patient Record was Modified  

**DESCRIPTION:** Date the patient record was modified.  

**SHORT NAME:** LAST_MODIFIED_DATE  

**LONG NAME:** LAST_MODIFIED_DATE  

**TYPE:** DATE  

**LENGTH:** 8  

**FILE(S):** Demographic  
Visit  
Alignment (final and EVAA cycle files)  

**SOURCE:** Million Hearts Data Registry  

**VALUES:** Ex — 06/15/2018  

**COMMENT:** Formatted as MMDDYY10 in SAS
LAST_NAME

LABEL: Provider's Last Name
DESCRIPTION: Provider's last name.
SHORT NAME: LAST_NAME
LONG NAME: LAST_NAME
TYPE: CHAR
LENGTH: 100
FILE(S): NPI
SOURCE: Million Hearts Data Registry
VALUES: —
COMMENT: —
MODIFIER

LABEL: Any Modifiers for the Base Code

DESCRIPTION: Any modifiers for the base code.

SHORT NAME: MODIFIER

LONG NAME: MODIFIER

TYPE: CHAR

LENGTH: 10

FILE(S): Clinical (final and raw)

SOURCE: Million Hearts Data Registry

VALUES: —

COMMENT: This field is only populated in the Clinical_raw file (not the Clinical_final where it is always missing). In the raw clinical file, values are a mixture of non-standardized values which may include numbers, words, NULL, N/A, free-form text, and other unknown values.
### NPI

**LABEL:** Provider's National Provider Identifier  
**DESCRIPTION:** Provider's National Provider Identifier (NPI).  
**SHORT NAME:** NPI  
**LONG NAME:** NPI  
**TYPE:** CHAR  
**LENGTH:** 10  
**FILE(S):** Clinical (final and raw)  
Visit  
NPI  
**SOURCE:** Million Hearts Data Registry  
**VALUES:** —  
**COMMENT:** —
### NPIS

**LABEL:** List of National Provider Identifiers in the Practice  

**DESCRIPTION:** List of National Provider Identifiers in the practice.  

**SHORT NAME:** NPIS  

**LONG NAME:** NPIS  

**TYPE:** CHAR  

**LENGTH:** 4000  

**FILE(S):** Practice  

**SOURCE:** Million Hearts Data Registry  

**VALUES:** —  

**COMMENT:** List of one or more NPI separated by a comma.
**PATIENT_DOB**

**LABEL:** Patient's Date of Birth

**DESCRIPTION:** Patient's date of birth (DOB).

**SHORT NAME:** PATIENT_DOB

**LONG NAME:** PATIENT_DOB

**TYPE:** DATE

**LENGTH:** 8

**FILE(S):** Demographic Alignment (final and EVAA cycle files)

**SOURCE:** Million Hearts Data Registry

**VALUES:** Ex — 04/22/1943

**COMMENT:** Formatted as MMDDYY10 in SAS

[^Back to TOC^]
**PATIENT_ETHNICITY**

**LABEL:** Patient's Ethnicity  
**DESCRIPTION:** Patient's ethnicity.  
**SHORT NAME:** PATIENT_ETHNICITY  
**LONG NAME:** PATIENT_ETHNICITY  
**TYPE:** CHAR  
**LENGTH:** 6  
**FILE(S):** Demographic  
Alignment (final and EVAA cycle files)  
**SOURCE:** Million Hearts Data Registry  
**VALUES:**  
- 2135-2 = Hispanic or Latino  
- 2186-5 = Not Hispanic or Latino  
- NA, or Null/missing  

**COMMENT:** —
PATIENT_GENDER

LABEL: Patient's Gender
DESCRIPTION: Patient's gender.
SHORT NAME: PATIENT_GENDER
LONG NAME: PATIENT_GENDER
TYPE: CHAR
LENGTH: 1
FILE(S): Demographic Alignment (final and EVAA cycle files)
SOURCE: Million Hearts Data Registry
VALUES: M = male
 F = female
 Null/missing
COMMENT: —
**PATIENT_RACE**

**LABEL:** Patient's Race

**DESCRIPTION:** Patient's race.

**SHORT NAME:** PATIENT_RACE

**LONG NAME:** PATIENT_RACE

**TYPE:** CHAR

**LENGTH:** 6

**FILE(S):** Demographic Alignment (final and EVAA cycle files)

**SOURCE:** Million Hearts Data Registry

**VALUES:**
- 1002-5 = American Indian or Alaska Native
- 2028-9 = Asian
- 2054-5 = Black or African American
- 2076-8 = Native Hawaiian or Other Pacific Islander
- 2106-3 = White
- 2131-1 = Other race
- Null/missing

**COMMENT:** —
**PRACTICE_ID**

**LABEL:** Model-Assigned Practice ID

**DESCRIPTION:** Model-assigned practice identifier (ID).

**SHORT NAME:** PRACTICE_ID

**LONG NAME:** PRACTICE_ID

**TYPE:** CHAR

**LENGTH:** 9

**FILE(S):** Clinical (final and raw)  
Visit  
Demographic  
Alignment (final and EVAA cycle files)  
Practice  
NPI

**SOURCE:** Million Hearts Data Registry

**VALUES:** Value formatted as: MH-xxxxxx  
Ex — MH-123456

**COMMENT:** This number appears on every MH data file and only has meaning within the MH model. The corresponding name of the practice is a field called PRACTICE_NAME.
<table>
<thead>
<tr>
<th><strong>PRACTICE_NAME</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>LABEL:</strong></td>
</tr>
<tr>
<td><strong>DESCRIPTION:</strong></td>
</tr>
<tr>
<td><strong>SHORT NAME:</strong></td>
</tr>
<tr>
<td><strong>LONG NAME:</strong></td>
</tr>
<tr>
<td><strong>TYPE:</strong></td>
</tr>
<tr>
<td><strong>LENGTH:</strong></td>
</tr>
<tr>
<td><strong>FILE(S):</strong></td>
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</tr>
<tr>
<td><strong>SOURCE:</strong></td>
</tr>
<tr>
<td><strong>VALUES:</strong></td>
</tr>
<tr>
<td><strong>COMMENT:</strong></td>
</tr>
</tbody>
</table>

^ Back to TOC ^
**REASON_CODE**

**LABEL:** Reason Code(s) for Patient Status Change

**DESCRIPTION:** Reason code(s) for patient status change.

**SHORT_NAME:** REASON_CODE

**LONG_NAME:** REASON_CODE

**TYPE:** CHAR

**LENGTH:** 250

**FILE(S):** Alignment (final and EVAA cycle files)

**SOURCE:** Million Hearts Data Registry

**VALUES:** Ex — S014, SC017, SC018, SC019

<table>
<thead>
<tr>
<th>Registry status</th>
<th>Status display in registry (patient grid)</th>
<th>Supporting codes (sub-codes)</th>
<th>Code definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>S001</td>
<td>Incomplete record</td>
<td>SC001</td>
<td>The temporarily not enrolled for cause beneficiary has now been accepted</td>
</tr>
<tr>
<td>S001</td>
<td>Incomplete record</td>
<td>SC002</td>
<td>The pending acceptance beneficiary is accepted, but data is not complete</td>
</tr>
<tr>
<td>S002</td>
<td>Released for validation</td>
<td>SC003</td>
<td>PO updated HICN for verify HICN action</td>
</tr>
<tr>
<td>S002</td>
<td>Released for validation</td>
<td>SC023</td>
<td>PO updated record for verify beneficiary action</td>
</tr>
<tr>
<td>S002</td>
<td>Released for validation</td>
<td>SC022</td>
<td>PO updated MBI for verify MBI action</td>
</tr>
<tr>
<td>S002</td>
<td>Released for validation</td>
<td>SC033</td>
<td>Beneficiary was lost to follow up</td>
</tr>
<tr>
<td>S002</td>
<td>Released for validation</td>
<td>SC034</td>
<td>PO updated records for dropped action</td>
</tr>
<tr>
<td>S002</td>
<td>Released for validation</td>
<td>SC036</td>
<td>PO updated visit for verify visit action</td>
</tr>
<tr>
<td>S003</td>
<td>Enrolled</td>
<td>SC004</td>
<td>The pending acceptance beneficiary was accepted and completed</td>
</tr>
<tr>
<td>S003</td>
<td>Enrolled</td>
<td>SC005</td>
<td>The temporarily not enrolled for cause beneficiary has now been accepted</td>
</tr>
<tr>
<td>S003</td>
<td>Enrolled</td>
<td>SC006</td>
<td>Beneficiary status changed to aligned</td>
</tr>
<tr>
<td>S003</td>
<td>Low/Med</td>
<td>SC015</td>
<td>The alignment record indicates that the Low- or Medium-risk patient is not aligned but eligible</td>
</tr>
<tr>
<td>S004</td>
<td>Pending acceptance</td>
<td>SC013</td>
<td>The beneficiary is pending acceptance</td>
</tr>
<tr>
<td>S005</td>
<td>Not aligned</td>
<td>SC014</td>
<td>Beneficiary status changed to not aligned</td>
</tr>
<tr>
<td>S006</td>
<td>Verify HICN</td>
<td>SC017</td>
<td>Verify HICN</td>
</tr>
<tr>
<td>S007</td>
<td>Ineligible</td>
<td>SC026</td>
<td>Exclusion: The beneficiary is not enrolled in Medicare Fee for Service Parts A and B</td>
</tr>
<tr>
<td>S007</td>
<td>Ineligible</td>
<td>SC027</td>
<td>Exclusion: The beneficiary is not age 40–79 at time of enrollment</td>
</tr>
<tr>
<td>S007</td>
<td>Ineligible</td>
<td>SC028</td>
<td>Exclusion: The beneficiary is enrolled in the hospice benefit</td>
</tr>
<tr>
<td>S007</td>
<td>Ineligible</td>
<td>SC029</td>
<td>Exclusion: The beneficiary is enrolled in Medicare Advantage</td>
</tr>
<tr>
<td>S007</td>
<td>Ineligible</td>
<td>SC030</td>
<td>Exclusion: Medicare is not a primary payer</td>
</tr>
<tr>
<td>S008</td>
<td>Permanently ineligible</td>
<td>SC025</td>
<td>Exclusion: The beneficiary is not alive</td>
</tr>
<tr>
<td>S008</td>
<td>Permanently ineligible</td>
<td>SC031</td>
<td>Exclusion: The beneficiary has end-stage renal disease</td>
</tr>
<tr>
<td>Registry status</td>
<td>Status display in registry (patient grid)</td>
<td>Supporting codes (sub-codes)</td>
<td>Code definition</td>
</tr>
<tr>
<td>-----------------</td>
<td>------------------------------------------</td>
<td>-----------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>S008</td>
<td>Permanently ineligible</td>
<td>SC032</td>
<td>Exclusion: The beneficiary has a previous heart attack or stroke</td>
</tr>
<tr>
<td>S009</td>
<td>Permanent: Not enrolled for cause</td>
<td>SC007</td>
<td>Significant comorbidities with a limited life expectancy of less than two years</td>
</tr>
<tr>
<td>S009</td>
<td>Permanent: Not enrolled for cause</td>
<td>SC008</td>
<td>Unstable angina</td>
</tr>
<tr>
<td>S009</td>
<td>Permanent: Not enrolled for cause</td>
<td>SC009</td>
<td>Class IV heart failure</td>
</tr>
<tr>
<td>S009</td>
<td>Permanent: Not enrolled for cause</td>
<td>SC010</td>
<td>Peripheral vascular disease</td>
</tr>
<tr>
<td>S009</td>
<td>Permanent: Not enrolled for cause</td>
<td>SC011</td>
<td>Prior heart attack or stroke</td>
</tr>
<tr>
<td>S010</td>
<td>Temporary: Not enrolled for cause</td>
<td>SC012</td>
<td>One-time encounter/Will not return for follow up</td>
</tr>
<tr>
<td>S010</td>
<td>Temporary: Not enrolled for cause</td>
<td>SC013</td>
<td>Beneficiary declines to participate in the model</td>
</tr>
<tr>
<td>S010</td>
<td>Unavailable cholesterol</td>
<td>SC016</td>
<td>Cholesterol not available or out of range</td>
</tr>
<tr>
<td>S011</td>
<td>Lost to follow-up</td>
<td></td>
<td>Enrolled beneficiary lost to follow-up</td>
</tr>
<tr>
<td>S012</td>
<td>Dropped</td>
<td></td>
<td>Low/Medium beneficiary lost to follow-up</td>
</tr>
</tbody>
</table>

**COMMENT:** Provides reason code(s) for patient status change, and if ELIGIBLE variable value is “N” provides the reason code for ineligibility; multiple codes are separated by commas. Codes that begin with “S” are status codes, those that begin with “SC” are supporting codes or subcodes.

[^ Back to TOC ^]
**RISK_SCORE**

**LABEL:** Calculated ASCVD Risk Score

**DESCRIPTION:** Calculated atherosclerotic cardiovascular disease (ASCVD) risk score.

**SHORT NAME:** RISK_SCORE

**LONG NAME:** RISK_SCORE

**TYPE:** CHAR

**LENGTH:** 10

**FILE(S):** Visit

**SOURCE:** Million Hearts Data Registry

**VALUES:** Ex — 21.7

**COMMENT:** This field is the ACC risk score calculated from information during the visit. The higher the score, the greater the ASCVD risk. If the visit is after the baseline visit, then the RISK_SCORE includes the value for that visit. Otherwise, at baseline, the two risk score fields match (i.e., BASELINE_SCORE equals RISK_SCORE).
<table>
<thead>
<tr>
<th>STATE</th>
<th>Practice’s State (postal abbreviation)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DESCRIPTION:</td>
<td>Practice’s state (postal abbreviation).</td>
</tr>
<tr>
<td>SHORT NAME:</td>
<td>STATE</td>
</tr>
<tr>
<td>LONG NAME:</td>
<td>STATE</td>
</tr>
<tr>
<td>TYPE:</td>
<td>CHAR</td>
</tr>
<tr>
<td>LENGTH:</td>
<td>2</td>
</tr>
<tr>
<td>FILE(S):</td>
<td>Practice</td>
</tr>
<tr>
<td>SOURCE:</td>
<td>Million Hearts Data Registry</td>
</tr>
<tr>
<td>VALUES:</td>
<td>Two-character postal state code</td>
</tr>
<tr>
<td></td>
<td>AK = Alaska</td>
</tr>
<tr>
<td></td>
<td>AL = Alabama</td>
</tr>
<tr>
<td></td>
<td>AR = Arkansas</td>
</tr>
<tr>
<td></td>
<td>AZ = Arizona</td>
</tr>
<tr>
<td></td>
<td>CA = California</td>
</tr>
<tr>
<td></td>
<td>CO = Colorado</td>
</tr>
<tr>
<td></td>
<td>CT = Connecticut</td>
</tr>
<tr>
<td></td>
<td>DC = District of Columbia</td>
</tr>
<tr>
<td></td>
<td>DE = Delaware</td>
</tr>
<tr>
<td></td>
<td>FL = Florida</td>
</tr>
<tr>
<td></td>
<td>GA = Georgia</td>
</tr>
<tr>
<td></td>
<td>HI = Hawaii</td>
</tr>
<tr>
<td></td>
<td>IA = Iowa</td>
</tr>
<tr>
<td></td>
<td>ID = Idaho</td>
</tr>
<tr>
<td></td>
<td>IL = Illinois</td>
</tr>
<tr>
<td></td>
<td>IN = Indiana</td>
</tr>
<tr>
<td></td>
<td>KS = Kansas</td>
</tr>
<tr>
<td></td>
<td>KY = Kentucky</td>
</tr>
<tr>
<td></td>
<td>LA = Louisiana</td>
</tr>
<tr>
<td></td>
<td>MA = Massachusetts</td>
</tr>
<tr>
<td></td>
<td>MD = Maryland</td>
</tr>
<tr>
<td></td>
<td>ME = Maine</td>
</tr>
<tr>
<td></td>
<td>MI = Michigan</td>
</tr>
<tr>
<td></td>
<td>MN = Minnesota</td>
</tr>
<tr>
<td></td>
<td>MO = Missouri</td>
</tr>
<tr>
<td></td>
<td>MS = Mississippi</td>
</tr>
<tr>
<td></td>
<td>MT = Montana</td>
</tr>
<tr>
<td></td>
<td>NC = North Carolina</td>
</tr>
<tr>
<td></td>
<td>ND = North Dakota</td>
</tr>
<tr>
<td></td>
<td>NE = Nebraska</td>
</tr>
<tr>
<td></td>
<td>NH = New Hampshire</td>
</tr>
<tr>
<td></td>
<td>NJ = New Jersey</td>
</tr>
<tr>
<td></td>
<td>NM = New Mexico</td>
</tr>
<tr>
<td></td>
<td>NV = Nevada</td>
</tr>
<tr>
<td></td>
<td>NY = New York</td>
</tr>
<tr>
<td></td>
<td>OH = Ohio</td>
</tr>
<tr>
<td></td>
<td>OK = Oklahoma</td>
</tr>
<tr>
<td></td>
<td>OR = Oregon</td>
</tr>
<tr>
<td></td>
<td>PA = Pennsylvania</td>
</tr>
<tr>
<td></td>
<td>PR = Puerto Rico</td>
</tr>
<tr>
<td></td>
<td>RI = Rhode Island</td>
</tr>
<tr>
<td></td>
<td>SC = South Carolina</td>
</tr>
<tr>
<td></td>
<td>TN = Tennessee</td>
</tr>
<tr>
<td></td>
<td>TX = Texas</td>
</tr>
<tr>
<td></td>
<td>UT = Utah</td>
</tr>
<tr>
<td></td>
<td>VA = Virginia</td>
</tr>
<tr>
<td></td>
<td>WA = Washington</td>
</tr>
<tr>
<td></td>
<td>WI = Wisconsin</td>
</tr>
<tr>
<td></td>
<td>WV = West Virginia</td>
</tr>
<tr>
<td></td>
<td>WY = Wyoming</td>
</tr>
</tbody>
</table>

COMMENT: This field is the state where billing TIN is located.
**TIN**

**LABEL:** Practice's Taxpayer Identification Number

**DESCRIPTION:** Practice's federal Taxpayer Identification Number (TIN).

**SHORT NAME:** TIN

**LONG NAME:** TIN

**TYPE:** CHAR

**LENGTH:** 9

**FILE(S):** Clinical (final and raw)  
Visit  
Demographic  
Alignment (final and EVAA cycle files)  
NPI

**SOURCE:** Million Hearts Data Registry

**VALUES:** —

**COMMENT:** If attempting to join to Medicare carrier claims files in the CCW, the provider Tax ID field is called TAX_NUM.
**TINS**

**LABEL:** List of Taxpayer Identification Numbers for the Practice

**DESCRIPTION:** List of federal Taxpayer Identification Numbers (TINs) for the practice.

**SHORT NAME:** TINS

**LONG NAME:** TINS

**TYPE:** CHAR

**LENGTH:** 4000

**FILE(S):** Practice

**SOURCE:** Million Hearts Data Registry

**VALUES:** —

**COMMENT:** This field is a list of one or more TINs for the practice, separated by a comma.
**UNIQUE_PATIENT_ID**

**LABEL:** Unique Model-Assigned Patient ID

**DESCRIPTION:** Unique patient ID assigned for the Million Hearts model.

**SHORT NAME:** UNIQUE_PATIENT_ID

**LONG NAME:** UNIQUE_PATIENT_ID

**TYPE:** CHAR

**LENGTH:** 36

**FILE(S):** Clinical (final and raw)  
Visit  
Demographic  
Alignment (final and EVAA cycle files)

**SOURCE:** Million Hearts Data Registry

**VALUES:** Value formatted as: ########-#####-#####-##############  
Ex — A1B2C3D4-E5F6-G7H8-IJKLM9012345

**COMMENT:** This identifier has meaning only within the CCW MHM data files; not linkable to any other data set. Within CCW you may use the BENE_ID to join to other Medicare data files (outside the MHM data product).
<table>
<thead>
<tr>
<th><strong>UNITS</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>LABEL:</strong></td>
</tr>
<tr>
<td><strong>DESCRIPTION:</strong></td>
</tr>
<tr>
<td><strong>SHORT NAME:</strong></td>
</tr>
<tr>
<td><strong>LONG NAME:</strong></td>
</tr>
<tr>
<td><strong>TYPE:</strong></td>
</tr>
<tr>
<td><strong>LENGTH:</strong></td>
</tr>
<tr>
<td><strong>FILE(S):</strong></td>
</tr>
<tr>
<td><strong>SOURCE:</strong></td>
</tr>
<tr>
<td><strong>VALUES:</strong></td>
</tr>
<tr>
<td><strong>COMMENT:</strong></td>
</tr>
</tbody>
</table>
**UPDATE_DATE**

**LABEL:** Date the Record was Modified

**DESCRIPTION:** The date when the practice or NPI record was modified.

**SHORT NAME:** UPDATE_DATE

**LONG NAME:** UPDATE_DATE

**TYPE:** DATE

**LENGTH:** 8

**FILE(S):** Practice

**SOURCE:** Million Hearts Data Registry

**VALUES:** Ex — 07/17/2019

**COMMENT:** Formatted as MMDDYY10 in SAS. This field is in two files. Within the practice file it is populated with the date the practice record was updated; within the NPI file it is the date the provider record was updated.
VALUE

LABEL: Value Provided for Certain Service Attributes

DESCRIPTION: Value provided for certain service attributes.

SHORT NAME: VALUE

LONG NAME: VALUE

TYPE: CHAR

LENGTH: 250

FILE(S): Clinical (final and raw)

SOURCE: Million Hearts Data Registry

VALUES: Ex — 114, 2, 684, 999, %, (12-27), 7.4 TH/UL, NORMAL, or null/missing

COMMENT: The values in the Clinical_final file have been cleaned and standardized and include missing values. In the raw clinical file, values are a mixture of non-standardized values which may include values from test results, ranges of values, symbols such as % or +, as well as free-form text, and other unknown values.

The information in the VALUE field is associated with CODE value in the Clinical_final file.

^ Back to TOC ^
**VISIT_DATE**

LABEL: Patient Visit Date

DESCRIPTION: The patient visit date.

SHORT NAME: VISIT_DATE

LONG NAME: VISIT_DATE

TYPE: DATE

LENGTH: 8

FILE(S): Visit

SOURCE: Million Hearts Data Registry

VALUES: Ex — 04/127/2018

COMMENT: Formatted as MMDDYY10 in SAS.
<table>
<thead>
<tr>
<th><strong>ZIP_CODE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>LABEL:</strong> Practice's Zip Code</td>
</tr>
<tr>
<td><strong>DESCRIPTION:</strong> Practice's zip code.</td>
</tr>
<tr>
<td><strong>SHORT NAME:</strong> ZIP_CODE</td>
</tr>
<tr>
<td><strong>LONG NAME:</strong> ZIP_CODE</td>
</tr>
<tr>
<td><strong>TYPE:</strong> CHAR</td>
</tr>
<tr>
<td><strong>LENGTH:</strong> 20</td>
</tr>
<tr>
<td><strong>FILE(S):</strong> Practice</td>
</tr>
<tr>
<td><strong>SOURCE:</strong> Million Hearts Data Registry</td>
</tr>
<tr>
<td><strong>VALUES:</strong> —</td>
</tr>
<tr>
<td><strong>COMMENT:</strong> This field is the zip code where billing TIN is located.</td>
</tr>
</tbody>
</table>

^ Back to TOC ^