

National Summary Data Report: 11 Episode-Based Cost Measures and Two Revised Cost Measures

Episode-Based Cost Measures:

- Acute Kidney Injury Requiring New Inpatient Dialysis
- Elective Primary Hip Arthroplasty
- Femoral or Inguinal Hernia Repair
- Hemodialysis Access Creation
- Inpatient Chronic Obstructive Pulmonary Disease (COPD) Exacerbation
- Lower Gastrointestinal Hemorrhage
- Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels
- Lumpectomy, Partial Mastectomy, Simple Mastectomy
- Non-Emergent Coronary Artery Bypass Graft (CABG)
- Psychoses/Related Conditions
- Renal or Ureteral Stone Surgical Treatment

Revised Measures:

- Medicare Spending Per Beneficiary (MSPB) clinician
- Total Per Capita Cost (TPCC)

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Updated Following Field Testing (Oct – Nov 2018)



Table of Contents

1.0 Introduction	4
1.1 Summary of MACRA Cost Measures Field Testing	5
1.2 Cost Measure Development and Re-evaluation.....	6
1.2.1 Episode-Based Cost Measures.....	6
1.2.2 Revised Cost Measures	7
1.3 Methodology.....	7
2.0 National Summary Statistics	9
2.1 Summary of Beneficiary Demographics.....	9
2.2 Reliability.....	10
2.3 Summary Information for Clinicians and Clinician Groups that are Attributed Cost Measures	11
2.4 Cost Measure Scores by Clinician and Clinician Group Characteristics.....	15

List of Tables and Figures

Table 1. Beneficiary Demographics	9
Table 2. Percentage of TINs and TIN-NPIs Meeting Reliability Threshold at the Case Minimums	10
Table 3-A. Number of TINs and TIN-NPIs Who Meet the Case Minima for One or More Episode-Based Cost Measures	12
Table 3-B. Number of TINs and TIN-NPIs Who Meet Case Minima for Revised Cost Measures	12
Table 4. Most Attributed Specialties by Number of Attributed TIN-NPIs.....	13
Table 5-A. Distribution of Number of Attributed Episodes/Bene-months per TIN	14
Table 5-B. Distribution of Number of Attributed Episodes/Bene-months per TIN-NPI...	15
Table 6-A. Acute Kidney Injury Requiring New Inpatient Dialysis, TIN Level Cost Measure Scores.....	16
Table 6-B. Acute Kidney Injury Requiring New Inpatient Dialysis, TIN-NPI Level Cost Measure Scores.....	17
Table 7-A. Elective Primary Hip Arthroplasty, TIN Level Cost Measure Scores.....	18
Table 7-B. Elective Primary Hip Arthroplasty, TIN-NPI Level Cost Measure Scores.....	19
Table 8-A. Femoral or Inguinal Hernia Repair, TIN Level Cost Measure Scores	20
Table 8-B. Femoral or Inguinal Hernia Repair, TIN-NPI Level Cost Measure Scores ...	21
Table 9-A. Hemodialysis Access Creation, TIN Level Cost Measure Scores.....	21
Table 9-B. Hemodialysis Access Creation, TIN-NPI Level Cost Measure Scores.....	22
Table 10-A. Inpatient Chronic Obstructive Pulmonary Disease (COPD) Exacerbation, TIN Level Cost Measure Scores	23
Table 10-B. Inpatient Chronic Obstructive Pulmonary Disease (COPD), TIN-NPI Level Cost Measure Scores	24
Table 11-A. Lower Gastrointestinal Hemorrhage, TIN Level Cost Measure Scores.....	25
Table 11-B. Lower Gastrointestinal Hemorrhage, TIN-NPI Level Cost Measure Scores	26
Table 12-A. Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels, TIN Level Cost Measure Scores.....	27

Table 12-B. Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels, TIN-NPI Level Cost Measure Scores	28
Table 13-A. Lumpectomy, Partial Mastectomy, Simple Mastectomy, TIN Level Cost Measure Scores.....	29
Table 13-B. Lumpectomy, Partial Mastectomy, Simple Mastectomy, TIN-NPI Level Cost Measure Scores.....	30
Table 14-A. Non-Emergent Coronary Artery Bypass Graft (CABG), TIN Level Cost Measure Scores.....	30
Table 14-B. Non-Emergent Coronary Artery Bypass Graft (CABG), TIN-NPI Level Cost Measure Scores.....	31
Table 15-A. Psychoses / Related Conditions, TIN Level Cost Measure Scores.....	32
Table 15-B. Psychoses / Related Conditions, TIN-NPI Level Cost Measure Scores	33
Table 16-A. Renal or Ureteral Stone Surgical Treatment, TIN Level Cost Measure Scores.....	34
Table 16-B. Renal or Ureteral Stone Surgical Treatment, TIN-NPI Level Cost Measure Scores.....	35
Table 17-A. Revised Medicare Spending Per Beneficiary (MSPB) clinician, TIN Level Cost Measure Scores	36
Table 17-B. Revised Medicare Spending Per Beneficiary (MSPB) clinician, TIN-NPI Level Cost Measure Scores	37
Table 18-A. Revised Total Per Capita Cost (TPCC), TIN Level Cost Measure Scores ..	38
Table 18-B. Revised Total Per Capital Cost (TPCC), TIN-NPI Level Cost Measure Scores.....	38

1.0 Introduction

The Centers for Medicare & Medicaid Services' (CMS) cost measure development contractor, Acumen, LLC (referred to as "Acumen") developed eleven episode based cost measures during Wave 2 for potential use in the cost performance category and revised two existing cost measures currently used in MIPS.¹ Acumen conducted field testing for these measures, through which clinicians and other stakeholders had an opportunity to provide feedback on the measure specifications and the field test report template. Field testing also served as an opportunity for clinicians to learn about cost measures and gain experience with the cost measure reports before their potential use in the Quality Payment Program.

During the MACRA Cost Measure Field Testing period in October to November 2018,² a version of this National Summary Data Report was posted on the CMS website to provide the results of empirical analyses for the eleven episode-based cost measures under development and the two cost measures under re-evaluation.³ It presented national-level summary statistics that provided information on the cost measures that stakeholders may use to understand the performance of clinicians and clinician groups relative to the performance of others nationally. Specifically, the report provided summary statistics on beneficiary demographics and episode attribution as well as analyses illustrating variation across providers in cost measure scores and episode costs.

This report has now been updated to include additional information requested by stakeholders and to provide summary statistics that reflect the final specifications of the eleven episode-based cost measures and two revised measures. An addendum to this report that provides information on the risk adjustment models, including the predictive ratios and R-squared figures, for the measures is also available separately on the MACRA Feedback Page.⁴ Both this report and the addendum use the final specifications which reflect refinements made to the measures, where applicable, as a result of the stakeholder feedback received during field testing.

The final measure specifications, updated after field testing, which include the Cost Measure Methodology document and a Measure Codes List file for each of the thirteen cost measures discussed in this report can be found on the [MACRA Feedback Page](#).

¹ The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) requires the Secretary, as determined appropriate, to conduct an analysis of cost with respect to care episode and patient condition groups (referred to as "episode groups") and use the methodology developed for purposes of the cost performance category of the Merit-based Incentive Payment System (MIPS). CMS has contracted with Acumen to develop and re-evaluate cost measures for potential use in the MIPS cost performance category of the Quality Payment Program.

² The field testing period was between October 3, 2018 and November 5, 2018, extended from the original deadline of October 31, 2018.

³ CMS, "National Summary Data Report: 11 Episode-Based Cost Measures and Two Re-evaluated Cost Measures, October 2018 Field Testing," *MACRA Feedback Page*, <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/2018-national-summary-data-report.pdf>

⁴ CMS, "National Summary Data Report Addendum – Regression Results for 11 Episode-Based Cost Measures and MSPB Clinician", *MACRA Feedback Page*, <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/MACRA-Feedback.html>

Section 1.1 discusses field testing of the thirteen cost measures while Section 1.2 provides an overview of the cost measure development and re-evaluation process. Section 1.3 presents the methodology and data sources used in this report.

1.1 Summary of MACRA Cost Measures Field Testing

The following eleven episode-based cost measures and two revised cost measures were field tested in October to November 2018.

Episode-Based Cost Measures:

- *Procedural cost measures*
 - Acute Kidney Injury Requiring New Inpatient Dialysis
 - Elective Primary Hip Arthroplasty
 - Femoral or Inguinal Hernia Repair
 - Hemodialysis Access Creation
 - Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels
 - Lumpectomy, Partial Mastectomy, Simple Mastectomy
 - Non-Emergent Coronary Artery Bypass Graft (CABG)
 - Renal or Ureteral Stone Surgical Treatment
- *Acute inpatient medical condition cost measures*
 - Inpatient Chronic Obstructive Pulmonary Disease (COPD) Exacerbation
 - Lower Gastrointestinal Hemorrhage
 - Psychoses/Related Conditions

Revised Cost Measures:

- Medicare Spending Per Beneficiary (MSPB) clinician
- Total Per Capita Cost (TPCC)

During field testing, clinicians and clinician groups were able to access field test reports on the CMS Enterprise Portal if they were attributed at least one of the cases listed below during the measurement period:

- 10 episodes for at least one of the 11 episode-based cost measures,
- 35 episodes for the revised MSPB clinician measure, and
- 20 beneficiaries for the revised TPCC measure.

The measurement period for field test reports for the episode-based cost measures and the MSPB clinician measure was January 1, 2017 through December 31, 2017. The measurement period for the TPCC measure was October 1, 2016 through September 30, 2017.⁵

These field test reports contained information on clinicians' and clinician groups' performance for these measures. Clinicians were identified by Taxpayer Identification Number and National Provider Identifier pairs (TIN-NPI), while clinician groups were identified by their TIN. A total of 20,443 field test reports were downloaded from the CMS Enterprise Total during the field testing period. 18,901 of the reports downloaded were at the TIN-NPI level and 1,542 reports were at the TIN-level. Episode-based cost measure field test reports accounted for 2,388 of the

⁵ Attributable beneficiary-months in the yearlong measurement period are included in the calculation of the TPCC measure. The year-long measurement period is broken up into 13 four-week months.

downloaded reports, while MSPB clinician accounted for 5,153 reports and TPCC accounted for 12,902 reports.

Feedback was collected on the field test report and the supplemental materials that were publicly posted during the field testing period. The following materials were included for each measure: the Draft Cost Measure Methodology, Draft Measure Codes List file, and a mock field test report. A Frequently Asked Questions document, a field testing Fact Sheet, and a document describing the episode-based cost measure development process were also available.⁶ CMS received 67 survey comments from stakeholders during the field testing feedback period, including 25 comment letters. A field testing feedback summary report is available on the MACRA Feedback Page.⁷

1.2 Cost Measure Development and Re-evaluation

Stakeholder input is critical to the development of robust, meaningful, and actionable cost measures. Throughout the measure development process, Acumen sought input from clinicians and other stakeholders ensure clinical face validity, clinical coherence, transparency, and comprehensibility. The episode-based cost measures were developed with input from Clinical Subcommittees, measure-specific workgroups, a technical expert panel (TEP), and a Person and Family Committee. The MSPB measure was revised with input from the TEP and the MSPB Service Refinement Workgroup, and TPCC measure with input from the TEP.

The TEP provided high-level guidance on the overall direction of measure development and re-evaluation, and on the framework for the episode-based cost measures. The measure-specific workgroups, comprising the measure-specific workgroups for the episode-based cost measures and the MSPB Service Refinement workgroup for the revised MSPB clinician measure provided input on the specifications of the measures. Specifically, the MSPB workgroup defined service exclusions for the measure, while the measure-specific workgroups convened to provide detailed input on each component of the episode-based cost measures.

After the October to November 2018 field testing period, Acumen analyzed the measure-specific feedback received from stakeholders and provided summary reports to the measure-specific workgroups for the 11 episode-based cost measures, and to the TEP for the two revised measures to inform post-field testing measure refinements.

This section provides further background on the cost measures included in this report.

1.2.1 Episode-Based Cost Measures

Episode-based cost measures represent the cost to Medicare for the items and services furnished to patients during an episode of care. These measures are intended to inform clinicians on the cost of care they are responsible for providing to a beneficiary during the episode's timeframe. The measures are designed to focus on costs that are clinically related to the care provided by clinicians to whom the episodes are attributed. In conjunction with quality

⁶ CMS, "2018 cost measure field testing", *MACRA Feedback Page*, <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/MACRA-Feedback.html>

⁷ CMS, "October-November 2018 Field Testing Feedback Summary Report for MACRA Cost Measures", *MACRA Feedback Page*, <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/MACRA-Feedback.html>

of care assessment, cost measures aim to incentivize high-value, patient centered care across a patient's care trajectory.

Eight of the cost measures are based on procedural episode groups while the remaining three are acute inpatient medical condition episode groups, as listed in Section 1.1 above.

1.2.2 Revised Cost Measures

The MSPB clinician and TPCC measures were refined from existing MIPS measures as part of the standard measure maintenance process established in the CMS Measures Management System Blueprint (Blueprint v 14.0)⁸, and are different than the MSPB and TPCC measures being used for the 2017 to 2019 MIPS performance periods. The information in this report and in any of the field testing materials provided during field testing did not and will not affect MIPS performance or payment adjustments for the 2017 to 2019 MIPS performance periods.

The MSPB clinician measure is a payment-standardized, risk-adjusted measure that assesses the cost performance of clinicians and clinician groups providing acute inpatient care services to Medicare beneficiaries. Specifically, the MSPB clinician measure assesses the cost to Medicare of services provided to a beneficiary during an MSPB clinician episode, which comprises the period immediately prior to, during, and following the beneficiary's hospital stay. To refine the measure, Acumen gathered stakeholder feedback from the TEP and the MSPB Service Refinement Workgroup. The MSPB clinician measure was revised in three ways: (i) a new attribution method was developed to attribute MSPB episodes at the TIN level instead of the TIN-NPI level, (ii) two new separate attribution methods for medical and surgical episodes were developed, and (iii) the removal of certain services identified as unlikely to be influenced by the clinician's care decisions.

The TPCC measure is a payment-standardized, risk-adjusted measure that assesses the cost performance of clinicians and clinician groups providing primary care services to Medicare beneficiaries. The TPCC measure is an average of per capita costs for Medicare Parts A and B across all attributed beneficiaries. Acumen gathered stakeholder feedback from the TEP to assist in refining the TPCC measure. The measure was revised to identify the attributed clinicians or clinician groups responsible for the primary care management of their patients. Specifically, the TPCC was revised to: (i) allow multiple attribution of clinicians and clinician groups to an episode and (ii) account for timing and patterns in care delivery to identify a primary care relationship.

1.3 Methodology

All empirical analyses presented in this document were conducted using the following data sources:

- Enrollment Database (EDB)
- Common Working File (CWF) Claims Data
 - Durable Medical Equipment (DME) Claims Data
 - Home Health (HH) Claims Data

⁸ CMS, "CMS Measures Management System Blueprint (Blueprint v 14.0)", *Measures Management System*, <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/MMS-Blueprint.html>.

- Hospice (HS) Claims Data
- Inpatient (IP) Claims Data
- Outpatient (OP) Claims Data
- Part B Physician/Supplier (PB) Claims Data
- Skilled Nursing (SN) Claims Data
- Minimum Data Set (MDS)

Cost figures presented in this report are defined by allowed amounts on Medicare claims data which represent the Medicare-allowed charge for a given service and include both Medicare payments and beneficiary deductible and coinsurance. Additionally, cost figures are standardized to remove the effect of differences in Medicare payment among health care providers that are the result of differences in regional health care provider expenses measured by hospital wage indexes and geographic price cost indexes (GPCIs) or other payment adjustments such as those for teaching hospitals. This standardization is intended to isolate cost differences that result from healthcare delivery choices, allowing for more accurate resource use comparisons between health care providers.⁹

The cost measures were developed and the cost measure scores were calculated based on the methodology given in the Cost Measure Methodology and the Measure Codes List files corresponding to each of the 13 cost measures. For the episode-based cost measures and revised MSPB clinician measure, all analyses were calculated on episodes ending during the measurement period of January 1, 2017 through December 31, 2017. For the revised TPCC measure, the measurement period is October 1, 2016 through September 30, 2017. Attributable beneficiary-months (henceforth, “bene-months”) in the year-long measurement period are included in the calculation of the TPCC measure.

⁹CMS, “CMS Price (Payment) Standardization - Basics” and “CMS Price (Payment) Standardization - Detailed Methods” *QualityNet page*, <http://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic/Page/QnetTier4&cid=1228772057350>.

2.0 National Summary Statistics

This section provides national summary statistics and high-level trends for the 13 cost measures. Section 2.1 presents summary statistics on beneficiary demographics. Section 2.2 discusses the reliability for each measure. Section 2.3 provides details on the number and specialties of clinicians and clinician groups that are attributed cost measures. Finally, Section 2.4 presents clinician (TIN-NPI) and clinician group (TIN) cost measure scores by various characteristics.

Unless otherwise noted in the table description, only clinicians and clinician groups attributed at least 10 episodes for the procedural episode-based cost measures, 20 episodes for the acute inpatient medical condition measures, 35 episodes for the revised MSPB clinician measure, and 20 beneficiaries for the revised TPCC measure for their respective measurement periods, as outlined in Section 1.3, are included in the tables below.

Note: The clinician and clinician group counts provided throughout this document are based on the clinicians/clinician groups billing Part B Physician/Supplier claims under a MIPS eligible clinician specialty, and do not reflect other MIPS eligibility criteria (e.g., Advanced APM participation).

2.1 Summary of Beneficiary Demographics

The table below provides a summary of the average age and percentage of female beneficiaries for each cost measure. Only beneficiaries with at least one attributable bene-month for the revised TPCC measure and at least one episode for one of the other 12 cost measures during the measurement period are included in this table. There may be more episodes/bene-months than beneficiaries since the same beneficiary can have more than one episode/bene-month in the period.

Note: There is no case minimum restriction for clinicians and clinician groups used in this table.

Table 1. Beneficiary Demographics

Cost Measure	# Episodes/Bene-months	# Beneficiaries	Average Age	Sex (% Female)
Acute Kidney Injury Requiring New Inpatient Dialysis	23,007	21,690	70.70	43.99%
Elective Primary Hip Arthroplasty	119,520	116,762	72.98	61.16%
Femoral or Inguinal Hernia Repair	87,549	86,778	73.46	11.40%
Hemodialysis Access Creation	53,896	47,855	66.50	45.91%
Inpatient Chronic Obstructive Pulmonary Disease (COPD) Exacerbation	350,449	268,968	73.01	58.88%
Lower Gastrointestinal Hemorrhage	81,351	74,782	79.09	55.22%
Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels	54,330	53,751	70.37	58.13%
Lumpectomy, Partial Mastectomy, Simple Mastectomy	54,485	50,034	73.79	99.13%
Non-Emergent Coronary Artery Bypass Graft (CABG)	44,092	44,092	72.61	27.22%
Psychoses / Related Conditions	168,876	104,484	51.55	47.84%

Cost Measure	# Episodes/Bene-months	# Beneficiaries	Average Age	Sex (% Female)
Renal or Ureteral Stone Surgical Treatment	105,232	87,442	70.33	43.52%
Revised Medicare Spending Per Beneficiary (MSPB) clinician	6,499,413	4,386,975	73.10	55.90%
Revised Total Per Capita Cost (TPCC)	306,058,709	26,663,220	72.22	57.42%

2.2 Reliability

Reliability is a number that shows the overall consistency of a measure, typically expressed as a number from 0 to 1. It refers to the extent to which a measure score reflects the true performance of a clinician or clinician group, as opposed to random variation. A measure with a reliability of one means that the same clinician, performing the same service, on the same set of patients, would always receive the same score. Reliability for a given clinician can be defined as the ratio of the between-group variance¹⁰ over the sum of the between-group variance and within group-variance.¹¹ CMS generally considers reliability levels between 0.4 and 0.7 as indicating “moderate” reliability and levels above 0.7 as indicating “high” reliability.

The table below presents the mean reliability of the cost measures and the percentage of TINs and TIN-NPIs meeting a 0.4 reliability threshold. Only episodes for clinicians and clinician groups who met the relevant case minimum for the cost measure are included in this table. Each row in this table provides the percentage of TINs and TIN-NPIs who had a reliability of 0.4 or higher among all the TINs and TIN-NPIs who met the case minimum for that measure during the study period.

Table 2. Percentage of TINs and TIN-NPIs Meeting Reliability Threshold at the Case Minimums

Cost Measure	Percent TINs meeting 0.4 reliability threshold	Mean Reliability for TINs	Percent TIN-NPIs meeting 0.4 reliability threshold	Mean Reliability for TIN-NPIs
Acute Kidney Injury Requiring New Inpatient Dialysis	100.0%	0.578	85.3%	0.483
Elective Primary Hip Arthroplasty	100.0%	0.854	100.0%	0.784
Femoral or Inguinal Hernia Repair	100.0%	0.861	100.0%	0.806
Hemodialysis Access Creation	93.1%	0.627	70.1%	0.483
Inpatient Chronic Obstructive Pulmonary Disease (COPD) Exacerbation	100.0%	0.692	68.0%	0.457
Lower Gastrointestinal Hemorrhage	74.6%	0.514	0.0%	0.204
Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels	100.0%	0.769	100.0%	0.694
Lumpectomy, Partial Mastectomy, Simple Mastectomy	100.0%	0.644	100.0%	0.602
Non-Emergent Coronary Artery Bypass Graft (CABG)	100.0%	0.822	100.0%	0.741
Psychoses / Related Conditions	100.0%	0.832	100.0%	0.870

¹⁰ The between-group variance measures the variance of the measure due to systematic differences between clinicians for whom the measure is calculated.

¹¹ The within-group variance measures the variance of the measure due to varying episode costs experienced by the original clinician.

Cost Measure	Percent TINs meeting 0.4 reliability threshold	Mean Reliability for TINs	Percent TIN-NPIs meeting 0.4 reliability threshold	Mean Reliability for TIN-NPIs
Renal or Ureteral Stone Surgical Treatment	100.0%	0.767	100.0%	0.652
Revised Medicare Spending Per Beneficiary (MSPB) clinician	100.0%	0.770	100.0%	0.693
Revised Total Per Capita Cost (TPCC)	100.0%	0.824	100.0%	0.885

2.3 Summary Information for Clinicians and Clinician Groups that are Attributed Cost Measures

Episodes are attributed to a principal (or managing) clinician based on the information available at the time of the trigger. The principal clinician is held responsible for the services that are assigned to the episode based on their clinical relevance to the clinician's role in managing patient care. Information from claims is used to identify the clinician to whom an episode is attributed.

For the episode-based cost measures, the rules for attributing episodes vary depending on the type of episode group. For acute inpatient medical condition episode groups, episodes are attributed to a clinician group rendering at least 30 percent of inpatient evaluation and management (E&M) services during an inpatient hospitalization with a medical Diagnosis-Related Groups (DRGs) for the episode group and to clinicians who bill at least one inpatient E&M claim line under a TIN that meets the 30 percent threshold. For procedural episode groups, episodes are attributed to clinicians or clinician groups rendering the trigger services as identified by Current Procedural Terminology/Healthcare Common Procedure Coding System (CPT/HCPCS) procedure codes found on the Medicare Part B Physician/Supplier (PB) claim.

For MSPB clinician, there are separate attribution rules for medical and surgical episodes. Medical episodes are attributed to a clinician group that render at least 30 percent of E&M services during the inpatient hospitalization for a hospitalization with a medical MS-DRG and to any clinician that billed at least one E&M service under a clinician group that meets the 30 percent threshold. Surgical episodes are attributed to the clinician and clinician group that render the main procedure of the stay as identified by the CPT/HCPCS code found on the PB claim concurrent to the surgical MS-DRG.

For TPCC, the attribution method accounts for the overall pattern of primary care service delivery to identify the existence of a primary care relationship. Beneficiaries are attributed to clinicians and clinician groups based on a subset of primary care E&M services associated with a specific set of primary care services, or another E&M service rendered by the same TIN, to be potentially indicative of a primary care relationship. Additionally, multiple clinicians and clinician groups can be attributed a beneficiary's cost.

For more information on the attribution methodologies for each of the cost measures, please refer the corresponding measure methodology for each measure available on the [MACRA Feedback Page](#).

Table 3-A below presents the number of clinicians and clinician groups that meet the case minima for one or more episode-based cost measures. Table 3-B presents the number of clinicians and clinicians groups that meet the case minima for the revised measures.

Table 3-A. Number of TINs and TIN-NPIs Who Meet the Case Minima for One or More Episode-Based Cost Measures

Number of EBCMs with Episodes Attributed	TIN Count	TIN-NPI Count
1	8,423	39,586
2	1,474	686
3	457	26
4	235	0
5	159	0
6	126	0
7	114	0
8	83	0
9	71	0
10	60	0
11	72	0

Table 3-B. Number of TINs and TIN-NPIs Who Meet Case Minima for Revised Cost Measures

Cost Measure	TIN Count	TIN-NPI Count
Revised Medicare Spending Per Beneficiary (MSPB) clinician	20,853	127,529
Revised Total Per Capita Cost (TPCC)	77,479	326,649

Table 4 below presents a summary of the three most attributed specialties for each of the measures, based on the number of TIN-NPIs attributed to each specialty. Specialty information in this table is based on the reported Health Care Finance Administration (HCFA) specialty designations found on the PB claims included in the episode.

Table 4. Most Attributed Specialties by Number of Attributed TIN-NPIs

Cost Measure	Most Attributed Specialty			Second Most Attributed Specialty			Third Most Attributed Specialty		
	Specialty	# of TIN-NPIs	# Episodes/Bene-months	Specialty	# of TIN-NPIs	# Episodes/Bene-months	Specialty	# of TIN-NPIs	# Episodes/Bene-months
Acute Kidney Injury Requiring New Inpatient Dialysis	Nephrology	2,138	14,709	Internal Medicine	68	550	Neurology	4	25
Elective Primary Hip Arthroplasty	Orthopedic Surgery	3,738	97,981	Physician Assistant	1,982	51,012	Nurse Practitioner	174	3,966
Femoral or Inguinal Hernia Repair	General Surgery	2,936	48,206	Physician Assistant	217	3,873	Nurse Practitioner	58	952
Hemodialysis Access Creation	Vascular Surgery	1,100	24,416	General Surgery	601	14,870	Physician Assistant	160	3,361
Inpatient Chronic Obstructive Pulmonary Disease (COPD) Exacerbation	Internal Medicine	5,671	113,302	Pulmonary Disease	2,505	69,671	Family Practice	1,016	24,675
Lower Gastrointestinal Hemorrhage	Gastroenterology	94	2,094	Internal Medicine	21	417	Nurse Practitioner	12	302
Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels	Orthopedic Surgery	1,101	21,903	Neurosurgery	1,023	19,003	Physician Assistant	862	16,791
Lumpectomy, Partial Mastectomy, Simple Mastectomy	General Surgery	1,382	29,936	Surgical Oncology	280	6,719	Physician Assistant	44	706
Non-Emergent Coronary Artery Bypass Graft (CABG)	Thoracic Surgery	867	18,744	Cardiac Surgery	863	19,399	Physician Assistant	746	14,567
Psychoses / Related Conditions	Psychiatry	3,856	127,465	Nurse Practitioner	739	27,564	Internal Medicine	394	19,366
Renal or Ureteral Stone Surgical Treatment	Urology	4,149	84,984	General Surgery	9	100	Internal Medicine	1	11
Revised Medicare Spending Per Beneficiary (MSPB) clinician	Internal Medicine	43,428	3,136,866	Cardiology	11,980	709,835	Orthopedic Surgery	7,900	588,726
Revised Total Per Capita Cost (TPCC)	Family Practice	73,710	114,650,571	Internal Medicine	65,598	124,533,396	Nurse Practitioner	64,637	45,147,573

The following tables provide a distribution of the number of episodes attributed to TINs and TIN-NPIs for each of the cost measures that were field tested.

Table 5-A. Distribution of Number of Attributed Episodes/Bene-months per TIN

Cost Measure	# TINs	Mean # of Episodes/Bene-months	Episode/Bene-month Count Percentile					
			10th	25th	50th	75th	90th	99th
Acute Kidney Injury Requiring New Inpatient Dialysis	771	25.67	11	13	19	30	48	100
Elective Primary Hip Arthroplasty	2,030	57.94	12	17	32	67	131	359
Femoral or Inguinal Hernia Repair	2,249	34.40	11	14	22	39	72	181
Hemodialysis Access Creation	1,200	42.19	13	17	28	52	86	207
Inpatient Chronic Obstructive Pulmonary Disease (COPD) Exacerbation	3,763	96.91	23	30	51	109	205	668
Lower Gastrointestinal Hemorrhage	1,274	53.70	22	26	38	61	109	242
Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels	1,440	36.80	12	15	24	42	76	197
Lumpectomy, Partial Mastectomy, Simple Mastectomy	1,210	39.45	11	15	24	47	85	204
Non-Emergent Coronary Artery Bypass Graft (CABG)	863	53.24	13	20	36	67	115	248
Psychoses / Related Conditions	2,265	80.45	25	34	54	97	162	406
Renal or Ureteral Stone Surgical Treatment	1,661	59.98	13	17	33	68	124	474
Revised Medicare Spending Per Beneficiary (MSPB) clinician	20,853	366.41	42	56	99	231	676	5,226
Revised Total Per Capita Cost (TPCC)	77,479	6,534	308	729	1,864	4,293	9,720	98,153

Table 5-B. Distribution of Number of Attributed Episodes/Bene-months per TIN-NPI

Cost Measure	# TIN-NPIs	Mean # of Episodes/Bene-months	Episode/Bene-month Count Percentile					
			10th	25th	50th	75th	90th	99th
Acute Kidney Injury Requiring New Inpatient Dialysis	2,182	15.28	10	11	14	18	22	34
Elective Primary Hip Arthroplasty	5,957	26.65	11	13	20	32	52	103
Femoral or Inguinal Hernia Repair	3,328	16.81	10	12	14	19	26	50
Hemodialysis Access Creation	2,048	23.44	11	13	17	27	41	98
Inpatient Chronic Obstructive Pulmonary Disease (COPD) Exacerbation	10,053	31.63	21	22	27	35	48	92
Lower Gastrointestinal Hemorrhage	137	24.67	20	21	23	26	31	45
Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels	3,286	19.85	11	12	16	23	33	67
Lumpectomy, Partial Mastectomy, Simple Mastectomy	1,734	22.25	11	13	18	27	40	72
Non-Emergent Coronary Artery Bypass Graft (CABG)	2,615	22.94	11	14	19	28	39	73
Psychoses / Related Conditions	5,538	49.19	22	27	37	56	89	209
Renal or Ureteral Stone Surgical Treatment	4,158	20.52	11	13	17	24	34	62
Revised Medicare Spending Per Beneficiary (MSPB) clinician	127,529	98.31	40	49	73	122	195	353
Revised Total Per Capita Cost (TPCC)	326,649	1,484	198	362	861	1,964	3,586	8,131

2.4 Cost Measure Scores by Clinician and Clinician Group Characteristics

A clinician or clinician group's cost measure score represents the risk-adjusted cost to Medicare for that measure. Risk adjustment aims to facilitate a more accurate comparison of cost across clinicians by adjusting for clinical and other characteristics of patients. Accounting for these factors is a way to ensure the validity of cost measures and to mitigate potential unintended consequences of evaluating clinicians based on costs.

Predictors in the risk adjustment model may include variables such as: the beneficiary's age, an indicator of whether a beneficiary is institutionalized in a long term care facility, as well as variables from the CMS Hierarchical Condition Category Version 22 (CMS-HCC V22) 2016 Risk Adjustment Model. For the episode-based cost measures, measure-specific workgroups may recommend additional clinical characteristics to include in the risk adjustment model that are specific to each episode-based cost measure. For more details on each measure's risk

adjustment model, please refer to the Cost Measure Methodology and Measure Codes List file for each measure.

Clinician and clinician group characteristics examined in this section include geographic variables based on the zip code found on Medicare claims. These include the urban-rural classification, census region, and census division for each zip code. The census region and census division classifications are used in subdividing the United States for the presentation of census data. There are nine census divisions and four census regions, each identified by a single-digit census code.¹² The urban-rural classification was derived from the rural indicator on the Zip Code to Carrier Locality file issued by CMS, where values of “rural” or “super rural” were used to identify zip codes as rural, and all other zip codes were classified as “urban.”¹³ Any zip codes that were not found in the Zip Code to Carrier Locality file were categorized as “unknown.”

The cost measure scores are also compared by risk score bracket (“risk bracket”), which may provide a way of drawing a more informative comparison between clinicians and clinician groups, as members of the same risk bracket are likely to have a similar patient case-mix. A clinician’s average risk score indicates how costly their episodes are expected to be, as predicted through risk adjustment. The distribution of average risk scores for all clinicians is divided into deciles, with each decile corresponding to a risk bracket. Clinicians and clinician groups with the lowest cost measure scores, indicating better cost measure performance, fall into the lowest decile (the 1st decile), while those with the highest cost measure scores fall into the highest decile (the 10th decile). **Note:** In each table below, all clinicians or clinician groups with one or more episodes were equally divided into risk brackets; after this division, those who did not meet the field testing episode case minimums were removed. As such, the number of clinicians/clinician groups is not equal across risk brackets.

Each table in this section presents the distribution of cost measure scores by a range of clinician/clinician group characteristics, allowing a comparison of score distributions for these breakdowns. These cost measure scores are presented at the TIN level and the TIN-NPI level for all 13 cost measures: Tables 6-A to 16-B show scores for the episode-based cost measures, Tables 17-A and 17-B show MSPB clinician measure scores, and Tables 18-A and 18-B show TPCC measure scores.

For episode-based cost measures with sub-groups, the average cost measure score for each sub-group is also presented. It is important to note that the measure scores for each sub-group are calculated using the average of the observed costs over expected costs and multiplied by the national average observed costs for the sub-group, rather than the episode group overall.

Table 6-A. Acute Kidney Injury Requiring New Inpatient Dialysis, TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	771	\$37,886	\$25,661	\$30,542	\$33,209	\$36,986	\$41,270	\$46,312	\$58,573
Urban/Rural									

¹² United States Census Bureau, “2010 Census Regions and Divisions of the United States,” <https://www.census.gov/geographies/reference-maps/2010/geo/2010-census-regions-and-divisions-of-the-united-states.html>

¹³ CMS, “Zip Code to Carrier Locality File – 2018 QTR 1,” <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ProsP Medicare Fee Svc Pmt Gen/Downloads/Zip-Code-to-Carrier-Locality.zip>

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
Urban	717	\$37,936	\$25,661	\$30,290	\$33,250	\$37,178	\$41,270	\$46,476	\$58,325
Rural	54	\$37,219	\$28,808	\$31,002	\$32,729	\$35,393	\$41,105	\$44,852	\$63,782
Census Region									
Northeast	123	\$38,132	\$24,576	\$29,342	\$33,224	\$36,622	\$42,571	\$49,021	\$58,573
Midwest	182	\$38,588	\$27,665	\$32,504	\$34,675	\$37,791	\$41,564	\$45,015	\$57,259
South	336	\$36,469	\$26,064	\$29,692	\$32,066	\$35,630	\$39,331	\$44,953	\$57,880
West	129	\$40,375	\$26,504	\$32,846	\$35,393	\$39,031	\$44,806	\$48,703	\$64,278
Unknown	1	\$34,733	\$34,733	\$34,733	\$34,733	\$34,733	\$34,733	\$34,733	\$34,733
Census Division									
New England	36	\$40,431	\$31,864	\$33,880	\$36,178	\$39,127	\$43,845	\$48,144	\$53,617
Middle Atlantic	87	\$37,180	\$21,697	\$28,418	\$31,784	\$35,216	\$41,927	\$49,166	\$60,492
East North Central	130	\$38,301	\$27,665	\$32,654	\$34,966	\$37,733	\$41,212	\$44,306	\$55,837
West North Central	52	\$39,307	\$28,124	\$31,959	\$33,532	\$38,264	\$42,820	\$50,194	\$65,194
South Atlantic	170	\$35,141	\$23,900	\$29,330	\$31,389	\$34,161	\$37,780	\$41,174	\$53,015
Each South Central	61	\$35,446	\$26,064	\$29,433	\$32,233	\$35,302	\$37,577	\$43,062	\$49,329
West South Central	105	\$39,215	\$29,219	\$31,628	\$34,161	\$37,961	\$41,885	\$47,727	\$63,782
Mountain	33	\$38,415	\$26,240	\$32,202	\$33,962	\$38,328	\$43,493	\$45,856	\$52,339
Pacific	96	\$41,049	\$26,504	\$33,049	\$35,831	\$39,747	\$45,326	\$49,902	\$67,150
Unknown	1	\$34,733	\$34,733	\$34,733	\$34,733	\$34,733	\$34,733	\$34,733	\$34,733
Provider Risk Score Decile									
1st	5	\$42,323	\$37,178	\$37,178	\$37,432	\$41,901	\$43,662	\$51,440	\$51,440
2nd	36	\$38,481	\$28,415	\$30,683	\$33,043	\$36,892	\$41,606	\$47,190	\$63,782
3rd	75	\$37,649	\$25,757	\$31,162	\$33,001	\$37,478	\$41,067	\$45,076	\$53,617
4th	109	\$37,114	\$24,576	\$31,349	\$33,119	\$36,959	\$39,980	\$44,806	\$53,610
5th	99	\$37,337	\$25,192	\$30,857	\$33,385	\$36,667	\$40,700	\$45,086	\$54,757
6th	115	\$36,962	\$25,246	\$29,739	\$32,744	\$35,867	\$38,913	\$45,015	\$65,194
7th	101	\$38,134	\$26,779	\$29,665	\$32,886	\$36,945	\$41,917	\$45,856	\$64,188
8th	112	\$36,750	\$25,661	\$29,244	\$31,796	\$35,839	\$40,324	\$45,408	\$56,523
9th	72	\$40,047	\$26,064	\$31,496	\$34,531	\$39,756	\$45,698	\$49,329	\$63,436
10th	47	\$41,407	\$31,398	\$33,387	\$36,986	\$39,806	\$45,281	\$51,715	\$58,573
Number of Episodes									
10-19 Episodes	394	\$37,837	\$25,192	\$29,429	\$32,783	\$36,680	\$41,556	\$46,717	\$63,782
20-39 Episodes	259	\$37,857	\$26,504	\$31,349	\$33,307	\$37,478	\$41,398	\$45,712	\$55,837
30-59 Episodes	79	\$38,207	\$29,075	\$31,315	\$34,250	\$37,757	\$41,583	\$45,856	\$53,015
60-79 Episodes	22	\$38,452	\$32,504	\$33,475	\$36,367	\$38,192	\$39,923	\$41,345	\$50,398
80-99 Episodes	7	\$39,076	\$32,490	\$32,490	\$36,667	\$39,959	\$41,404	\$45,086	\$45,086
100-199 Episodes	8	\$36,060	\$32,202	\$32,202	\$35,063	\$36,371	\$37,539	\$38,328	\$38,328
200-299 Episodes	2	\$35,511	\$35,393	\$35,393	\$35,393	\$35,511	\$35,630	\$35,630	\$35,630
300+ Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table 6-B. Acute Kidney Injury Requiring New Inpatient Dialysis, TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	2,182	\$43,456	\$28,832	\$34,144	\$37,671	\$42,404	\$47,981	\$54,180	\$67,385
Urban/Rural									
Urban	2,051	\$43,572	\$28,521	\$34,005	\$37,671	\$42,557	\$48,145	\$54,365	\$67,385
Rural	131	\$41,633	\$31,820	\$35,140	\$37,250	\$40,222	\$45,255	\$50,444	\$56,880
Census Region									
Northeast	286	\$42,386	\$26,352	\$32,833	\$35,949	\$41,263	\$47,677	\$54,084	\$64,848
Midwest	608	\$44,698	\$30,526	\$36,671	\$39,939	\$43,702	\$48,354	\$53,591	\$66,055
South	920	\$42,134	\$28,251	\$33,110	\$36,199	\$40,772	\$46,275	\$53,348	\$68,718
West	368	\$45,539	\$30,316	\$35,431	\$39,170	\$44,284	\$50,761	\$56,731	\$74,262
Census Division									
New England	78	\$47,835	\$33,779	\$39,040	\$43,062	\$46,618	\$53,466	\$57,230	\$65,896
Middle Atlantic	208	\$40,343	\$26,352	\$31,605	\$34,905	\$39,194	\$44,463	\$51,459	\$62,840
East North Central	472	\$44,445	\$30,526	\$36,538	\$39,825	\$43,412	\$48,026	\$52,868	\$66,055

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
West North Central	136	\$45,577	\$28,832	\$37,504	\$40,681	\$44,623	\$49,218	\$54,937	\$69,822
South Atlantic	483	\$41,249	\$27,889	\$32,741	\$35,379	\$39,600	\$45,243	\$53,026	\$70,193
Each South Central	183	\$40,848	\$29,868	\$32,908	\$35,884	\$39,725	\$44,537	\$51,455	\$60,152
West South Central	254	\$44,741	\$31,434	\$35,414	\$38,354	\$43,788	\$49,444	\$56,113	\$73,290
Mountain	185	\$43,535	\$29,073	\$34,332	\$37,714	\$42,100	\$48,188	\$53,610	\$80,350
Pacific	183	\$47,565	\$31,342	\$38,546	\$41,420	\$46,385	\$52,909	\$59,056	\$74,262
Provider Risk Score Decile									
1st	25	\$48,021	\$33,704	\$37,071	\$41,146	\$47,882	\$54,019	\$59,951	\$73,689
2nd	165	\$45,402	\$32,010	\$35,414	\$40,810	\$44,316	\$50,089	\$55,300	\$80,522
3rd	238	\$42,459	\$28,394	\$33,923	\$37,024	\$41,186	\$46,728	\$52,739	\$62,042
4th	266	\$42,729	\$29,073	\$33,662	\$37,171	\$41,576	\$46,441	\$52,877	\$74,119
5th	312	\$42,276	\$27,520	\$33,516	\$36,974	\$41,784	\$46,859	\$50,995	\$64,522
6th	321	\$41,979	\$28,832	\$33,202	\$36,723	\$40,618	\$46,144	\$52,486	\$63,432
7th	303	\$42,928	\$29,444	\$34,215	\$37,178	\$41,535	\$46,838	\$54,365	\$68,718
8th	238	\$43,391	\$27,842	\$34,095	\$38,082	\$42,409	\$47,351	\$54,084	\$66,659
9th	213	\$45,608	\$31,413	\$35,261	\$39,912	\$44,636	\$50,488	\$57,128	\$66,653
10th	101	\$48,938	\$34,496	\$38,502	\$42,893	\$49,059	\$54,241	\$58,850	\$64,455
Number of Episodes									
10-19 Episodes	1,814	\$43,434	\$28,512	\$33,813	\$37,147	\$42,380	\$48,217	\$54,678	\$67,437
20-39 Episodes	358	\$43,668	\$31,187	\$36,060	\$39,141	\$43,056	\$46,970	\$51,807	\$65,687
30-59 Episodes	6	\$40,273	\$37,293	\$37,293	\$38,021	\$39,941	\$42,692	\$43,750	\$43,750
60-79 Episodes	4	\$39,017	\$36,917	\$36,917	\$37,875	\$38,993	\$40,160	\$41,167	\$41,167
80-99 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
100-199 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
200-299 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
300+ Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table 7-A. Elective Primary Hip Arthroplasty, TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	2,030	\$19,801	\$15,757	\$17,006	\$18,151	\$19,606	\$21,185	\$22,668	\$26,421
Urban/Rural									
Urban	1,695	\$19,856	\$15,838	\$17,104	\$18,274	\$19,640	\$21,212	\$22,757	\$26,581
Rural	333	\$19,534	\$15,260	\$16,835	\$17,707	\$19,394	\$21,066	\$22,515	\$25,279
Unknown	2	\$17,877	\$17,425	\$17,425	\$17,425	\$17,877	\$18,329	\$18,329	\$18,329
Census Region									
Northeast	375	\$20,635	\$16,586	\$18,174	\$19,315	\$20,626	\$21,708	\$23,095	\$26,146
Midwest	500	\$19,574	\$15,515	\$16,810	\$18,042	\$19,319	\$20,835	\$22,342	\$27,344
South	709	\$20,074	\$15,932	\$17,134	\$18,401	\$19,824	\$21,640	\$23,151	\$26,581
West	443	\$18,930	\$15,757	\$16,620	\$17,474	\$18,646	\$19,967	\$21,834	\$24,750
Unknown	3	\$17,736	\$17,425	\$17,425	\$17,425	\$17,453	\$18,329	\$18,329	\$18,329
Census Division									
New England	136	\$20,760	\$16,833	\$18,332	\$19,628	\$20,792	\$21,711	\$22,857	\$24,814
Middle Atlantic	239	\$20,564	\$16,519	\$18,091	\$19,125	\$20,477	\$21,708	\$23,204	\$26,421
East North Central	342	\$19,831	\$15,522	\$16,992	\$18,238	\$19,532	\$21,176	\$22,618	\$27,060
West North Central	158	\$19,017	\$15,491	\$16,764	\$17,705	\$18,883	\$20,086	\$21,386	\$27,671
South Atlantic	385	\$19,815	\$15,643	\$16,868	\$18,122	\$19,725	\$21,234	\$22,784	\$25,328
Each South Central	113	\$20,115	\$16,870	\$17,462	\$18,452	\$19,751	\$21,763	\$23,023	\$24,920
West South Central	211	\$20,524	\$15,932	\$17,576	\$18,888	\$20,182	\$22,028	\$23,551	\$27,857
Mountain	165	\$19,060	\$15,899	\$16,820	\$17,503	\$18,762	\$20,254	\$21,971	\$24,571
Pacific	278	\$18,853	\$15,724	\$16,552	\$17,422	\$18,602	\$19,860	\$21,619	\$24,803
Unknown	3	\$17,736	\$17,425	\$17,425	\$17,425	\$17,453	\$18,329	\$18,329	\$18,329
Provider Risk Score Decile									
1st	42	\$19,112	\$13,437	\$16,471	\$17,348	\$19,058	\$20,385	\$21,601	\$27,629
2nd	171	\$19,093	\$15,522	\$16,820	\$17,338	\$18,619	\$20,309	\$22,348	\$25,683
3rd	260	\$19,187	\$15,724	\$16,648	\$17,600	\$18,887	\$20,544	\$21,728	\$24,814
4th	279	\$19,157	\$15,751	\$16,860	\$17,791	\$18,912	\$20,192	\$21,856	\$24,531

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
5th	287	\$19,606	\$15,491	\$17,153	\$18,240	\$19,490	\$20,808	\$22,157	\$25,561
6th	283	\$19,500	\$15,351	\$16,954	\$18,104	\$19,418	\$20,572	\$22,218	\$25,124
7th	260	\$20,202	\$16,036	\$17,577	\$18,560	\$20,084	\$21,759	\$22,834	\$25,023
8th	247	\$20,795	\$16,032	\$17,934	\$19,431	\$20,941	\$22,390	\$23,378	\$25,774
9th	152	\$21,261	\$16,338	\$18,290	\$19,660	\$21,193	\$22,309	\$23,974	\$30,007
10th	49	\$21,015	\$15,925	\$17,822	\$18,870	\$21,033	\$22,346	\$25,446	\$26,935
Number of Episodes									
10-19 Episodes	612	\$20,476	\$15,522	\$16,985	\$18,486	\$20,212	\$22,282	\$23,973	\$28,690
20-39 Episodes	554	\$20,036	\$15,811	\$17,243	\$18,420	\$19,925	\$21,437	\$22,870	\$25,561
30-59 Episodes	297	\$19,554	\$16,173	\$17,338	\$18,270	\$19,481	\$20,753	\$21,802	\$24,107
60-79 Episodes	147	\$19,232	\$15,490	\$16,519	\$17,911	\$19,070	\$20,660	\$21,708	\$24,980
80-99 Episodes	105	\$19,277	\$15,643	\$17,432	\$18,218	\$19,099	\$20,123	\$21,773	\$22,666
100-199 Episodes	217	\$18,863	\$16,069	\$16,653	\$17,675	\$18,736	\$19,920	\$21,004	\$22,638
200-299 Episodes	67	\$18,537	\$15,453	\$16,972	\$17,600	\$18,418	\$19,417	\$20,527	\$23,482
300+ Episodes	31	\$18,430	\$15,751	\$16,870	\$17,170	\$17,610	\$20,035	\$20,387	\$21,800

Table 7-B. Elective Primary Hip Arthroplasty, TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	5,957	\$19,116	\$14,968	\$16,379	\$17,366	\$18,824	\$20,577	\$22,191	\$25,412
Urban/Rural									
Urban	5,243	\$19,113	\$14,994	\$16,379	\$17,379	\$18,828	\$20,552	\$22,201	\$25,412
Rural	705	\$19,133	\$14,679	\$16,376	\$17,253	\$18,824	\$20,722	\$22,115	\$25,379
Unknown	9	\$19,076	\$16,897	\$16,897	\$17,615	\$18,761	\$19,935	\$22,994	\$22,994
Census Region									
Northeast	1,039	\$19,908	\$15,776	\$17,201	\$18,262	\$19,890	\$21,388	\$22,654	\$25,481
Midwest	1,569	\$18,976	\$14,912	\$16,178	\$17,268	\$18,684	\$20,455	\$21,979	\$25,169
South	2,082	\$19,262	\$14,948	\$16,419	\$17,441	\$19,036	\$20,699	\$22,502	\$25,785
West	1,257	\$18,393	\$14,695	\$16,210	\$16,955	\$18,086	\$19,501	\$21,149	\$24,977
Unknown	10	\$18,902	\$16,897	\$17,081	\$17,332	\$18,482	\$19,935	\$22,004	\$22,994
Census Division									
New England	386	\$20,318	\$16,098	\$17,719	\$19,090	\$20,416	\$21,516	\$22,848	\$25,081
Middle Atlantic	653	\$19,665	\$15,653	\$16,978	\$17,941	\$19,470	\$21,158	\$22,510	\$25,849
East North Central	1,067	\$19,282	\$15,344	\$16,455	\$17,468	\$18,998	\$20,760	\$22,426	\$25,684
West North Central	502	\$18,326	\$14,679	\$15,924	\$16,719	\$18,044	\$19,732	\$20,972	\$24,224
South Atlantic	1,272	\$19,005	\$14,749	\$16,248	\$17,192	\$18,799	\$20,486	\$22,147	\$25,154
Each South Central	331	\$19,227	\$15,531	\$16,535	\$17,552	\$19,051	\$20,497	\$22,076	\$24,525
West South Central	479	\$19,972	\$15,217	\$16,758	\$18,045	\$19,585	\$21,698	\$23,537	\$27,802
Mountain	522	\$18,451	\$14,704	\$16,251	\$16,941	\$18,086	\$19,644	\$21,365	\$24,977
Pacific	735	\$18,352	\$14,695	\$16,189	\$16,970	\$18,086	\$19,427	\$20,940	\$24,883
Unknown	10	\$18,902	\$16,897	\$17,081	\$17,332	\$18,482	\$19,935	\$22,004	\$22,994
Provider Risk Score Decile									
1st	112	\$18,197	\$15,788	\$16,179	\$16,817	\$17,959	\$19,389	\$21,197	\$22,426
2nd	481	\$18,400	\$14,962	\$16,131	\$16,822	\$17,985	\$19,670	\$21,210	\$25,089
3rd	725	\$18,525	\$14,676	\$16,182	\$16,893	\$18,145	\$19,765	\$21,551	\$25,412
4th	865	\$18,747	\$14,704	\$16,232	\$17,149	\$18,481	\$20,012	\$21,543	\$25,025
5th	887	\$18,902	\$15,107	\$16,398	\$17,319	\$18,673	\$20,119	\$21,940	\$25,156
6th	839	\$19,109	\$15,178	\$16,394	\$17,491	\$18,953	\$20,453	\$22,070	\$24,977
7th	776	\$19,387	\$15,223	\$16,489	\$17,593	\$19,165	\$20,901	\$22,561	\$25,168
8th	689	\$19,859	\$15,478	\$16,833	\$18,020	\$19,868	\$21,494	\$22,912	\$25,658
9th	446	\$20,059	\$15,685	\$17,222	\$18,284	\$19,867	\$21,511	\$23,013	\$26,590
10th	137	\$20,910	\$16,186	\$18,286	\$19,119	\$20,688	\$22,468	\$24,482	\$27,841
Number of Episodes									
10-19 Episodes	2,934	\$19,514	\$14,968	\$16,460	\$17,634	\$19,220	\$21,155	\$22,809	\$26,398
20-39 Episodes	1,964	\$18,963	\$15,023	\$16,456	\$17,399	\$18,778	\$20,370	\$21,653	\$24,214
30-59 Episodes	654	\$18,283	\$14,684	\$16,128	\$16,957	\$17,985	\$19,449	\$20,729	\$23,937
60-79 Episodes	259	\$18,388	\$15,121	\$16,319	\$16,859	\$17,974	\$19,459	\$20,869	\$25,165

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
80-99 Episodes	82	\$18,147	\$15,642	\$16,328	\$16,811	\$17,741	\$19,229	\$20,234	\$23,366
100-199 Episodes	61	\$18,194	\$15,042	\$16,039	\$16,687	\$17,769	\$19,957	\$20,631	\$21,637
200-299 Episodes	3	\$18,794	\$17,281	\$17,281	\$17,281	\$19,527	\$19,573	\$19,573	\$19,573
300+ Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table 8-A. Femoral or Inguinal Hernia Repair, TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	2,249	\$4,111	\$2,802	\$3,511	\$3,977	\$4,218	\$4,351	\$4,479	\$4,795
Sub-group									
Laparoscopic Repair	1,780	\$4,924	\$3,083	\$4,234	\$4,783	\$5,059	\$5,215	\$5,357	\$5,878
Open Repair	2,209	\$3,749	\$2,501	\$3,117	\$3,606	\$3,839	\$3,973	\$4,132	\$4,803
Urban/Rural									
Urban	1,779	\$4,094	\$2,807	\$3,468	\$3,950	\$4,209	\$4,337	\$4,455	\$4,766
Rural	469	\$4,176	\$2,717	\$3,704	\$4,089	\$4,264	\$4,386	\$4,544	\$4,841
Unknown	1	\$4,517	\$4,517	\$4,517	\$4,517	\$4,517	\$4,517	\$4,517	\$4,517
Census Region									
Northeast	421	\$4,230	\$3,093	\$3,899	\$4,149	\$4,292	\$4,398	\$4,505	\$4,794
Midwest	519	\$4,137	\$2,821	\$3,521	\$4,023	\$4,231	\$4,362	\$4,510	\$4,788
South	843	\$4,093	\$2,832	\$3,540	\$3,946	\$4,195	\$4,333	\$4,441	\$4,807
West	464	\$4,011	\$2,755	\$3,291	\$3,795	\$4,164	\$4,315	\$4,421	\$4,833
Unknown	2	\$3,175	\$1,834	\$1,834	\$1,834	\$3,175	\$4,517	\$4,517	\$4,517
Census Division									
New England	135	\$4,275	\$3,426	\$4,002	\$4,201	\$4,296	\$4,376	\$4,540	\$4,772
Middle Atlantic	286	\$4,208	\$2,994	\$3,773	\$4,120	\$4,291	\$4,406	\$4,499	\$4,850
East North Central	352	\$4,157	\$2,821	\$3,617	\$4,073	\$4,234	\$4,360	\$4,495	\$4,705
West North Central	167	\$4,095	\$2,770	\$3,385	\$3,840	\$4,218	\$4,377	\$4,542	\$4,948
South Atlantic	446	\$4,108	\$2,956	\$3,578	\$3,948	\$4,206	\$4,341	\$4,477	\$4,891
Each South Central	160	\$4,077	\$2,709	\$3,553	\$3,970	\$4,201	\$4,333	\$4,414	\$4,594
West South Central	237	\$4,076	\$2,778	\$3,512	\$3,937	\$4,180	\$4,315	\$4,421	\$4,783
Mountain	178	\$4,091	\$2,756	\$3,655	\$3,934	\$4,179	\$4,326	\$4,430	\$4,944
Pacific	286	\$3,961	\$2,750	\$3,190	\$3,634	\$4,127	\$4,312	\$4,418	\$4,833
Unknown	2	\$3,175	\$1,834	\$1,834	\$1,834	\$3,175	\$4,517	\$4,517	\$4,517
Provider Risk Score Decile									
1st	32	\$4,056	\$2,684	\$3,263	\$3,572	\$4,361	\$4,516	\$4,788	\$4,996
2nd	120	\$4,088	\$2,730	\$3,083	\$3,868	\$4,289	\$4,444	\$4,550	\$4,950
3rd	190	\$4,104	\$2,699	\$3,295	\$3,987	\$4,253	\$4,377	\$4,534	\$4,990
4th	247	\$4,078	\$2,760	\$3,449	\$3,874	\$4,191	\$4,351	\$4,481	\$4,772
5th	250	\$4,078	\$2,807	\$3,366	\$3,877	\$4,218	\$4,343	\$4,452	\$4,841
6th	308	\$4,129	\$2,901	\$3,623	\$4,019	\$4,221	\$4,340	\$4,479	\$4,794
7th	344	\$4,130	\$2,937	\$3,634	\$4,022	\$4,228	\$4,342	\$4,438	\$4,632
8th	324	\$4,108	\$3,146	\$3,696	\$3,972	\$4,178	\$4,303	\$4,436	\$4,695
9th	265	\$4,140	\$2,852	\$3,704	\$4,013	\$4,219	\$4,358	\$4,478	\$4,643
10th	169	\$4,132	\$2,988	\$3,682	\$4,024	\$4,209	\$4,342	\$4,430	\$4,719
Number of Episodes									
10-19 Episodes	972	\$4,144	\$2,757	\$3,567	\$3,988	\$4,243	\$4,389	\$4,539	\$4,944
20-39 Episodes	717	\$4,108	\$2,849	\$3,488	\$4,002	\$4,221	\$4,347	\$4,463	\$4,659
30-59 Episodes	263	\$4,037	\$2,832	\$3,435	\$3,888	\$4,174	\$4,295	\$4,390	\$4,536
60-79 Episodes	116	\$4,089	\$2,958	\$3,486	\$3,990	\$4,218	\$4,322	\$4,395	\$4,540
80-99 Episodes	53	\$4,032	\$3,230	\$3,468	\$3,848	\$4,165	\$4,260	\$4,345	\$4,424
100-199 Episodes	115	\$4,081	\$3,189	\$3,596	\$3,905	\$4,214	\$4,293	\$4,347	\$4,431
200-299 Episodes	8	\$4,144	\$3,617	\$3,617	\$4,037	\$4,242	\$4,302	\$4,375	\$4,375
300+ Episodes	5	\$4,016	\$3,556	\$3,556	\$3,827	\$4,222	\$4,231	\$4,241	\$4,241

Table 8-B. Femoral or Inguinal Hernia Repair, TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	3,328	\$4,102	\$2,765	\$3,387	\$3,944	\$4,240	\$4,382	\$4,516	\$4,831
Subgroup									
Laparoscopic Repair	2,206	\$4,886	\$2,948	\$4,038	\$4,743	\$5,076	\$5,230	\$5,356	\$5,751
Open Repair	3,174	\$3,732	\$2,410	\$2,998	\$3,555	\$3,835	\$3,997	\$4,160	\$4,947
Urban/Rural									
Urban	2,826	\$4,089	\$2,765	\$3,349	\$3,927	\$4,236	\$4,376	\$4,508	\$4,817
Rural	502	\$4,175	\$2,768	\$3,643	\$4,026	\$4,275	\$4,401	\$4,542	\$4,870
Census Region									
Northeast	584	\$4,231	\$2,875	\$3,750	\$4,146	\$4,316	\$4,427	\$4,541	\$4,749
Midwest	723	\$4,099	\$2,690	\$3,387	\$3,959	\$4,234	\$4,386	\$4,522	\$4,818
South	1,305	\$4,103	\$2,802	\$3,429	\$3,943	\$4,222	\$4,371	\$4,496	\$4,894
West	715	\$4,000	\$2,764	\$3,200	\$3,665	\$4,178	\$4,355	\$4,484	\$4,834
Unknown	1	\$1,845	\$1,845	\$1,845	\$1,845	\$1,845	\$1,845	\$1,845	\$1,845
Census Division									
New England	190	\$4,297	\$3,347	\$4,010	\$4,239	\$4,327	\$4,412	\$4,524	\$4,795
Middle Atlantic	394	\$4,199	\$2,825	\$3,618	\$4,109	\$4,301	\$4,434	\$4,548	\$4,749
East North Central	484	\$4,108	\$2,690	\$3,402	\$4,019	\$4,240	\$4,370	\$4,502	\$4,817
West North Central	239	\$4,082	\$2,555	\$3,364	\$3,880	\$4,227	\$4,409	\$4,567	\$4,870
South Atlantic	784	\$4,121	\$2,845	\$3,463	\$3,968	\$4,240	\$4,382	\$4,521	\$4,980
Each South Central	205	\$4,065	\$2,850	\$3,478	\$3,912	\$4,194	\$4,348	\$4,437	\$4,663
West South Central	316	\$4,081	\$2,796	\$3,397	\$3,902	\$4,191	\$4,349	\$4,467	\$4,813
Mountain	280	\$4,102	\$2,765	\$3,536	\$3,931	\$4,219	\$4,377	\$4,493	\$4,733
Pacific	435	\$3,935	\$2,747	\$3,109	\$3,477	\$4,112	\$4,344	\$4,483	\$4,856
Unknown	1	\$1,845	\$1,845	\$1,845	\$1,845	\$1,845	\$1,845	\$1,845	\$1,845
Provider Risk Score Decile									
1st	43	\$4,031	\$2,758	\$3,015	\$3,538	\$4,289	\$4,482	\$4,602	\$5,135
2nd	247	\$4,087	\$2,701	\$3,082	\$3,897	\$4,302	\$4,429	\$4,570	\$5,127
3rd	370	\$4,064	\$2,641	\$3,134	\$3,843	\$4,252	\$4,393	\$4,554	\$5,016
4th	426	\$4,074	\$2,733	\$3,332	\$3,869	\$4,224	\$4,383	\$4,520	\$4,738
5th	378	\$4,069	\$2,794	\$3,332	\$3,855	\$4,193	\$4,359	\$4,494	\$5,001
6th	351	\$4,088	\$2,775	\$3,427	\$3,959	\$4,203	\$4,346	\$4,509	\$4,720
7th	404	\$4,135	\$2,802	\$3,507	\$3,988	\$4,255	\$4,394	\$4,523	\$4,722
8th	457	\$4,126	\$2,820	\$3,518	\$3,998	\$4,246	\$4,382	\$4,499	\$4,795
9th	421	\$4,138	\$2,799	\$3,567	\$4,027	\$4,257	\$4,386	\$4,478	\$4,665
10th	231	\$4,145	\$3,060	\$3,716	\$4,020	\$4,221	\$4,357	\$4,449	\$4,755
Number of Episodes									
10-19 Episodes	2,559	\$4,118	\$2,764	\$3,442	\$3,965	\$4,245	\$4,388	\$4,527	\$4,870
20-39 Episodes	693	\$4,055	\$2,795	\$3,249	\$3,893	\$4,226	\$4,366	\$4,477	\$4,736
30-59 Episodes	64	\$4,021	\$2,820	\$3,196	\$3,762	\$4,239	\$4,370	\$4,457	\$4,558
60-79 Episodes	8	\$3,939	\$3,039	\$3,039	\$3,664	\$4,139	\$4,275	\$4,317	\$4,317
80-99 Episodes	1	\$2,952	\$2,952	\$2,952	\$2,952	\$2,952	\$2,952	\$2,952	\$2,952
100-199 Episodes	3	\$3,599	\$3,204	\$3,204	\$3,204	\$3,211	\$4,383	\$4,383	\$4,383
200-299 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
300+ Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table 9-A. Hemodialysis Access Creation, TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	1,200	\$5,914	\$3,376	\$4,521	\$5,175	\$5,834	\$6,557	\$7,433	\$9,341
Sub-group									
Arteriovenous Fistula (AVF)	1,198	\$5,072	\$2,602	\$3,820	\$4,363	\$4,963	\$5,667	\$6,431	\$8,416
Arteriovenous Graft (AVG)	1,124	\$8,004	\$1,897	\$4,615	\$5,817	\$7,549	\$9,326	\$11,616	\$20,013
Urban/Rural									
Urban	1,070	\$5,907	\$3,350	\$4,529	\$5,175	\$5,812	\$6,557	\$7,421	\$9,309
Rural	129	\$5,977	\$3,394	\$4,471	\$5,129	\$6,030	\$6,565	\$7,583	\$9,407

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
Unknown	1	\$6,069	\$6,069	\$6,069	\$6,069	\$6,069	\$6,069	\$6,069	\$6,069
Census Region									
Northeast	206	\$6,109	\$3,689	\$4,704	\$5,241	\$6,038	\$6,747	\$7,623	\$9,616
Midwest	257	\$5,972	\$3,567	\$4,605	\$5,280	\$5,887	\$6,698	\$7,536	\$9,352
South	501	\$5,933	\$3,350	\$4,525	\$5,231	\$5,846	\$6,568	\$7,348	\$9,309
West	223	\$5,680	\$3,089	\$4,399	\$4,991	\$5,651	\$6,303	\$7,018	\$8,617
Unknown	13	\$5,005	\$3,394	\$3,550	\$4,411	\$4,729	\$4,976	\$6,069	\$9,407
Census Division									
New England	46	\$6,235	\$4,450	\$4,906	\$5,488	\$6,203	\$6,808	\$7,582	\$8,907
Middle Atlantic	160	\$6,073	\$3,185	\$4,617	\$5,203	\$6,005	\$6,689	\$7,688	\$9,880
East North Central	181	\$6,029	\$3,842	\$4,776	\$5,386	\$5,898	\$6,679	\$7,506	\$9,353
West North Central	76	\$5,837	\$3,374	\$4,190	\$5,036	\$5,812	\$6,767	\$7,575	\$9,196
South Atlantic	261	\$5,975	\$3,350	\$4,700	\$5,236	\$5,899	\$6,568	\$7,299	\$9,731
Each South Central	81	\$5,827	\$3,568	\$4,611	\$5,187	\$5,694	\$6,301	\$7,327	\$9,330
West South Central	159	\$5,917	\$2,656	\$4,355	\$5,173	\$5,745	\$6,687	\$7,430	\$9,289
Mountain	59	\$5,701	\$2,036	\$4,252	\$5,229	\$5,774	\$6,276	\$7,292	\$8,633
Pacific	164	\$5,673	\$3,475	\$4,399	\$4,924	\$5,606	\$6,319	\$6,979	\$8,617
Unknown	13	\$5,005	\$3,394	\$3,550	\$4,411	\$4,729	\$4,976	\$6,069	\$9,407
Provider Risk Score Decile									
1st	38	\$5,800	\$2,036	\$4,441	\$4,807	\$6,005	\$6,506	\$7,292	\$8,050
2nd	98	\$5,766	\$3,089	\$4,391	\$4,874	\$5,579	\$6,449	\$7,380	\$11,491
3rd	119	\$6,101	\$3,350	\$4,519	\$5,326	\$6,143	\$6,774	\$7,748	\$9,309
4th	142	\$5,933	\$2,693	\$4,685	\$5,372	\$5,829	\$6,555	\$7,137	\$9,523
5th	149	\$5,852	\$3,700	\$4,692	\$5,141	\$5,893	\$6,369	\$7,327	\$9,353
6th	145	\$6,000	\$3,394	\$4,522	\$5,235	\$5,767	\$6,643	\$7,766	\$9,330
7th	148	\$5,837	\$3,567	\$4,534	\$5,266	\$5,802	\$6,354	\$7,030	\$8,939
8th	143	\$5,996	\$3,612	\$4,697	\$5,265	\$5,909	\$6,678	\$7,536	\$8,735
9th	140	\$5,848	\$3,121	\$4,270	\$5,222	\$5,811	\$6,608	\$7,167	\$9,077
10th	78	\$5,915	\$2,511	\$4,411	\$4,858	\$5,771	\$6,941	\$7,801	\$11,592
Number of Episodes									
10-19 Episodes	404	\$5,936	\$3,031	\$4,185	\$4,839	\$5,820	\$6,782	\$7,894	\$9,880
20-39 Episodes	359	\$5,906	\$3,550	\$4,513	\$5,124	\$5,837	\$6,646	\$7,412	\$8,725
30-59 Episodes	187	\$5,842	\$3,700	\$4,851	\$5,313	\$5,752	\$6,335	\$7,054	\$8,132
60-79 Episodes	106	\$5,934	\$4,168	\$4,959	\$5,346	\$5,817	\$6,395	\$6,979	\$8,735
80-99 Episodes	53	\$5,995	\$4,311	\$5,061	\$5,455	\$5,864	\$6,637	\$6,974	\$7,906
100-199 Episodes	78	\$5,952	\$4,511	\$5,116	\$5,527	\$5,905	\$6,444	\$6,832	\$7,536
200-299 Episodes	11	\$5,775	\$3,089	\$5,016	\$5,704	\$6,065	\$6,309	\$6,421	\$6,743
300+ Episodes	2	\$5,894	\$5,739	\$5,739	\$5,739	\$5,894	\$6,049	\$6,049	\$6,049

Table 9-B. Hemodialysis Access Creation, TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	2,048	\$5,916	\$3,123	\$4,429	\$5,026	\$5,808	\$6,631	\$7,561	\$9,570
Sub-group									
Arteriovenous Fistula (AVF)	2,044	\$5,076	\$2,532	\$3,737	\$4,224	\$4,928	\$5,724	\$6,660	\$8,943
Arteriovenous Graft (AVG)	1,903	\$8,036	\$1,894	\$4,338	\$5,480	\$7,228	\$9,526	\$12,468	\$22,811
Urban/Rural									
Urban	1,865	\$5,910	\$3,033	\$4,417	\$5,026	\$5,798	\$6,636	\$7,551	\$9,636
Rural	181	\$5,977	\$3,397	\$4,498	\$5,035	\$5,958	\$6,571	\$7,588	\$9,336
Unknown	2	\$5,980	\$5,173	\$5,173	\$5,173	\$5,980	\$6,787	\$6,787	\$6,787
Census Region									
Northeast	316	\$6,078	\$3,354	\$4,499	\$5,152	\$5,976	\$6,708	\$7,739	\$10,764
Midwest	445	\$5,911	\$3,407	\$4,480	\$5,004	\$5,819	\$6,685	\$7,501	\$9,616
South	900	\$5,932	\$3,025	\$4,426	\$5,057	\$5,817	\$6,659	\$7,575	\$9,305
West	373	\$5,776	\$2,564	\$4,405	\$4,953	\$5,701	\$6,499	\$7,464	\$9,244
Unknown	14	\$5,071	\$3,397	\$3,552	\$4,414	\$4,746	\$5,173	\$6,787	\$9,413
Census Division									
New England	86	\$6,340	\$3,354	\$4,817	\$5,183	\$6,297	\$7,066	\$7,894	\$11,937

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
Middle Atlantic	230	\$5,979	\$3,294	\$4,362	\$5,142	\$5,862	\$6,591	\$7,578	\$10,713
East North Central	318	\$5,915	\$3,654	\$4,563	\$5,035	\$5,825	\$6,683	\$7,476	\$9,238
West North Central	127	\$5,901	\$3,378	\$4,372	\$4,832	\$5,711	\$6,734	\$7,710	\$10,069
South Atlantic	480	\$5,987	\$3,200	\$4,544	\$5,106	\$5,912	\$6,684	\$7,570	\$9,570
Each South Central	155	\$5,788	\$3,017	\$4,295	\$4,931	\$5,673	\$6,499	\$7,565	\$9,043
West South Central	265	\$5,917	\$2,658	\$4,359	\$5,058	\$5,776	\$6,723	\$7,667	\$9,290
Mountain	100	\$5,743	\$1,746	\$3,884	\$4,977	\$5,839	\$6,550	\$7,552	\$8,835
Pacific	273	\$5,789	\$2,941	\$4,464	\$4,946	\$5,665	\$6,497	\$7,301	\$9,373
Unknown	14	\$5,071	\$3,397	\$3,552	\$4,414	\$4,746	\$5,173	\$6,787	\$9,413
Provider Risk Score Decile									
1st	37	\$5,620	\$2,564	\$4,161	\$4,719	\$5,743	\$6,331	\$7,551	\$8,886
2nd	132	\$5,818	\$2,386	\$4,402	\$4,971	\$5,885	\$6,571	\$7,200	\$9,886
3rd	191	\$6,019	\$2,941	\$4,458	\$5,073	\$5,932	\$6,636	\$7,588	\$10,589
4th	256	\$5,976	\$3,313	\$4,417	\$5,068	\$5,877	\$6,643	\$7,663	\$9,689
5th	258	\$5,968	\$3,812	\$4,628	\$5,026	\$5,821	\$6,606	\$7,646	\$9,529
6th	269	\$5,936	\$3,252	\$4,474	\$5,106	\$5,719	\$6,696	\$7,671	\$9,336
7th	285	\$5,792	\$2,890	\$4,380	\$4,956	\$5,747	\$6,564	\$7,232	\$8,787
8th	268	\$6,028	\$3,715	\$4,609	\$5,187	\$5,877	\$6,792	\$7,691	\$9,151
9th	243	\$5,849	\$3,103	\$4,424	\$5,074	\$5,704	\$6,604	\$7,496	\$9,083
10th	109	\$5,831	\$3,294	\$4,045	\$4,596	\$5,487	\$6,858	\$7,848	\$10,764
Number of Episodes									
10-19 Episodes	1,167	\$5,927	\$3,014	\$4,284	\$4,904	\$5,796	\$6,704	\$7,806	\$10,069
20-39 Episodes	648	\$5,878	\$3,552	\$4,552	\$5,137	\$5,775	\$6,560	\$7,299	\$8,758
30-59 Episodes	145	\$5,921	\$3,997	\$4,858	\$5,305	\$5,790	\$6,500	\$7,137	\$8,252
60-79 Episodes	47	\$6,067	\$2,892	\$5,086	\$5,481	\$5,901	\$6,436	\$7,503	\$9,529
80-99 Episodes	22	\$5,859	\$2,883	\$4,657	\$5,027	\$6,218	\$6,859	\$6,978	\$7,349
100-199 Episodes	16	\$6,277	\$5,348	\$5,520	\$5,838	\$6,138	\$6,796	\$7,140	\$7,710
200-299 Episodes	3	\$5,635	\$5,019	\$5,019	\$5,019	\$5,902	\$5,982	\$5,982	\$5,982
300+ Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table 10-A. Inpatient Chronic Obstructive Pulmonary Disease (COPD) Exacerbation, TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	3,763	\$13,148	\$10,305	\$11,574	\$12,231	\$12,967	\$13,850	\$14,933	\$17,745
Sub-group									
COPD Exacerbation with Mechanical Ventilation < 24 hours	1,692	\$24,311	\$13,052	\$16,454	\$18,799	\$22,549	\$27,227	\$34,334	\$56,258
COPD Exacerbation with Mechanical Ventilation 24-96 hours	2,594	\$27,196	\$14,246	\$17,835	\$20,775	\$25,095	\$30,543	\$38,854	\$65,067
COPD Exacerbation with Non-invasive Positive Pressure Ventilation (NIPPV) without Mechanical Ventilation (MV)	2,936	\$15,566	\$8,050	\$10,647	\$12,733	\$14,781	\$17,235	\$20,769	\$33,224
COPD Exacerbation with No Non-invasive Positive Pressure Ventilation (NIPPV) or Mechanical Ventilation (MV)	3,763	\$12,175	\$9,268	\$10,608	\$11,294	\$12,011	\$12,876	\$13,863	\$16,583
Urban/Rural									
Urban	2,901	\$13,268	\$10,427	\$11,699	\$12,347	\$13,080	\$13,941	\$15,057	\$17,887
Rural	861	\$12,744	\$10,033	\$11,196	\$11,869	\$12,593	\$13,436	\$14,449	\$16,209
Unknown	1	\$11,837	\$11,837	\$11,837	\$11,837	\$11,837	\$11,837	\$11,837	\$11,837
Census Region									
Northeast	628	\$13,662	\$10,849	\$12,023	\$12,787	\$13,493	\$14,412	\$15,504	\$17,882

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
Midwest	934	\$12,906	\$10,367	\$11,540	\$12,141	\$12,789	\$13,503	\$14,480	\$16,209
South	1,708	\$13,094	\$10,165	\$11,574	\$12,205	\$12,944	\$13,819	\$14,840	\$17,341
West	491	\$13,144	\$9,979	\$11,229	\$12,035	\$12,729	\$13,749	\$15,063	\$24,376
Unknown	2	\$11,467	\$11,097	\$11,097	\$11,097	\$11,467	\$11,837	\$11,837	\$11,837
Census Division									
New England	148	\$13,759	\$11,579	\$12,377	\$12,929	\$13,630	\$14,358	\$15,345	\$17,958
Middle Atlantic	480	\$13,632	\$10,483	\$11,904	\$12,738	\$13,448	\$14,432	\$15,529	\$17,882
East North Central	695	\$13,026	\$10,665	\$11,674	\$12,242	\$12,871	\$13,639	\$14,616	\$16,436
West North Central	239	\$12,556	\$10,062	\$11,263	\$11,868	\$12,577	\$13,193	\$13,766	\$15,010
South Atlantic	830	\$13,137	\$10,512	\$11,646	\$12,193	\$13,009	\$13,897	\$14,907	\$16,775
Each South Central	402	\$12,946	\$10,055	\$11,536	\$12,214	\$12,833	\$13,578	\$14,484	\$16,883
West South Central	476	\$13,145	\$9,983	\$11,520	\$12,208	\$12,942	\$13,870	\$14,980	\$18,349
Mountain	166	\$12,478	\$10,068	\$11,155	\$11,738	\$12,366	\$13,203	\$13,937	\$15,143
Pacific	325	\$13,485	\$9,979	\$11,305	\$12,211	\$12,967	\$14,079	\$15,661	\$25,704
Unknown	2	\$11,467	\$11,097	\$11,097	\$11,097	\$11,467	\$11,837	\$11,837	\$11,837
Provider Risk Score Decile									
1st	14	\$12,590	\$10,290	\$11,154	\$11,470	\$12,064	\$14,255	\$14,739	\$14,961
2nd	81	\$12,758	\$9,920	\$11,225	\$11,784	\$12,647	\$13,657	\$14,325	\$15,745
3rd	200	\$13,020	\$9,824	\$11,111	\$11,897	\$12,822	\$13,979	\$15,120	\$17,540
4th	380	\$13,013	\$10,102	\$11,484	\$12,096	\$12,926	\$13,829	\$14,702	\$16,670
5th	573	\$13,059	\$10,427	\$11,491	\$12,267	\$12,907	\$13,723	\$14,968	\$16,367
6th	712	\$13,047	\$10,602	\$11,676	\$12,276	\$12,929	\$13,677	\$14,549	\$16,651
7th	758	\$13,119	\$10,516	\$11,661	\$12,273	\$12,976	\$13,782	\$14,740	\$17,325
8th	613	\$13,203	\$10,378	\$11,578	\$12,233	\$12,968	\$13,840	\$15,107	\$17,727
9th	339	\$13,574	\$10,210	\$11,723	\$12,409	\$13,347	\$14,434	\$15,586	\$19,997
10th	93	\$14,041	\$10,237	\$11,786	\$12,538	\$13,361	\$14,915	\$16,084	\$27,987
Number of Episodes									
10-19 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
20-39 Episodes	1,457	\$13,266	\$9,944	\$11,225	\$11,996	\$12,983	\$14,303	\$15,482	\$18,547
30-59 Episodes	648	\$13,230	\$10,385	\$11,516	\$12,287	\$13,069	\$14,042	\$15,114	\$17,341
60-79 Episodes	354	\$13,078	\$10,639	\$11,656	\$12,324	\$12,964	\$13,797	\$14,638	\$16,436
80-99 Episodes	253	\$13,063	\$10,932	\$11,781	\$12,355	\$13,050	\$13,712	\$14,380	\$15,893
100-199 Episodes	657	\$12,977	\$11,125	\$11,807	\$12,331	\$12,913	\$13,534	\$14,184	\$15,870
200-299 Episodes	185	\$13,033	\$11,168	\$12,074	\$12,455	\$12,930	\$13,564	\$14,129	\$15,321
300+ Episodes	209	\$12,930	\$11,569	\$12,072	\$12,510	\$12,903	\$13,351	\$13,794	\$14,520

Table 10-B. Inpatient Chronic Obstructive Pulmonary Disease (COPD), TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	10,053	\$14,402	\$11,023	\$12,343	\$13,240	\$14,272	\$15,419	\$16,554	\$19,127
Sub-group									
COPD Exacerbation with Mechanical Ventilation < 24 hours	2,759	\$25,440	\$13,037	\$16,500	\$18,666	\$22,722	\$29,559	\$38,523	\$60,111
COPD Exacerbation with Mechanical Ventilation 24-96 hours	5,753	\$28,056	\$14,244	\$17,857	\$20,538	\$25,325	\$32,251	\$40,988	\$72,378
COPD Exacerbation with Non-invasive Positive Pressure Ventilation (NIPPV) without Mechanical Ventilation (MV)	7,072	\$16,619	\$8,350	\$10,843	\$12,966	\$15,764	\$18,922	\$22,806	\$37,868
COPD Exacerbation with No Non-invasive Positive Pressure Ventilation (NIPPV) or Mechanical Ventilation (MV)	10,053	\$13,068	\$9,769	\$11,044	\$11,913	\$12,911	\$14,059	\$15,197	\$17,898

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
Urban/Rural									
Urban	7,919	\$14,531	\$11,192	\$12,482	\$13,343	\$14,364	\$15,549	\$16,729	\$19,397
Rural	2,128	\$13,921	\$10,678	\$11,994	\$12,853	\$13,860	\$14,928	\$15,927	\$17,733
Unknown	6	\$14,941	\$12,661	\$12,661	\$13,667	\$15,373	\$16,145	\$16,427	\$16,427
Census Region									
Northeast	1,925	\$14,940	\$11,514	\$12,809	\$13,772	\$14,835	\$15,930	\$17,129	\$20,092
Midwest	2,519	\$14,228	\$11,023	\$12,274	\$13,129	\$14,138	\$15,154	\$16,321	\$18,239
South	4,964	\$14,321	\$11,005	\$12,323	\$13,201	\$14,197	\$15,311	\$16,438	\$18,723
West	639	\$14,091	\$10,469	\$11,857	\$12,716	\$13,803	\$15,065	\$16,455	\$23,439
Unknown	6	\$14,941	\$12,661	\$12,661	\$13,667	\$15,373	\$16,145	\$16,427	\$16,427
Census Division									
New England	778	\$14,920	\$11,522	\$12,903	\$13,798	\$14,834	\$15,924	\$17,009	\$19,538
Middle Atlantic	1,147	\$14,954	\$11,485	\$12,762	\$13,738	\$14,835	\$15,936	\$17,224	\$20,250
East North Central	1,878	\$14,332	\$11,118	\$12,410	\$13,201	\$14,225	\$15,283	\$16,440	\$18,523
West North Central	641	\$13,922	\$10,931	\$12,057	\$12,858	\$13,859	\$14,867	\$15,826	\$17,423
South Atlantic	2,720	\$14,310	\$11,005	\$12,343	\$13,173	\$14,236	\$15,308	\$16,367	\$18,524
Each South Central	1,259	\$14,240	\$10,850	\$12,270	\$13,203	\$14,067	\$15,218	\$16,323	\$18,561
West South Central	985	\$14,452	\$11,187	\$12,351	\$13,264	\$14,283	\$15,439	\$16,694	\$20,066
Mountain	252	\$13,524	\$10,770	\$11,675	\$12,459	\$13,433	\$14,287	\$15,357	\$17,834
Pacific	387	\$14,460	\$10,265	\$11,897	\$12,842	\$14,030	\$15,556	\$16,858	\$26,073
Unknown	6	\$14,941	\$12,661	\$12,661	\$13,667	\$15,373	\$16,145	\$16,427	\$16,427
Provider Risk Score Decile									
1st	44	\$13,568	\$11,006	\$11,787	\$12,196	\$13,676	\$14,637	\$15,795	\$16,287
2nd	283	\$14,226	\$10,436	\$12,059	\$12,904	\$14,085	\$15,379	\$16,744	\$19,127
3rd	782	\$14,209	\$10,841	\$12,099	\$13,015	\$13,984	\$15,159	\$16,527	\$19,125
4th	1,351	\$14,352	\$10,978	\$12,292	\$13,213	\$14,206	\$15,422	\$16,548	\$18,457
5th	1,845	\$14,399	\$11,119	\$12,440	\$13,296	\$14,281	\$15,320	\$16,516	\$18,843
6th	2,027	\$14,327	\$10,900	\$12,240	\$13,153	\$14,246	\$15,351	\$16,464	\$18,963
7th	1,828	\$14,485	\$11,311	\$12,419	\$13,280	\$14,344	\$15,491	\$16,597	\$19,728
8th	1,284	\$14,506	\$11,292	\$12,474	\$13,306	\$14,366	\$15,577	\$16,607	\$19,132
9th	548	\$14,687	\$11,188	\$12,648	\$13,476	\$14,453	\$15,695	\$16,854	\$22,418
10th	61	\$14,695	\$11,435	\$12,975	\$13,327	\$14,722	\$15,573	\$16,811	\$18,791
Number of Episodes									
10-19 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
20-39 Episodes	8,249	\$14,364	\$10,966	\$12,251	\$13,148	\$14,200	\$15,423	\$16,617	\$19,341
30-59 Episodes	1,292	\$14,529	\$11,495	\$12,704	\$13,505	\$14,430	\$15,363	\$16,381	\$18,702
60-79 Episodes	331	\$14,711	\$11,835	\$13,169	\$13,910	\$14,664	\$15,499	\$16,315	\$18,060
80-99 Episodes	117	\$14,569	\$12,639	\$13,275	\$13,735	\$14,529	\$15,424	\$15,931	\$17,115
100-199 Episodes	63	\$14,848	\$13,085	\$13,534	\$13,997	\$14,826	\$15,613	\$16,362	\$17,086
200-299 Episodes	1	\$12,866	\$12,866	\$12,866	\$12,866	\$12,866	\$12,866	\$12,866	\$12,866
300+ Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table 11-A. Lower Gastrointestinal Hemorrhage, TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	1,274	\$10,564	\$8,847	\$9,577	\$10,053	\$10,517	\$11,050	\$11,584	\$12,904
Urban/Rural									
Urban	1,127	\$10,564	\$8,847	\$9,573	\$10,060	\$10,531	\$11,062	\$11,566	\$12,596
Rural	147	\$10,559	\$8,965	\$9,617	\$10,013	\$10,430	\$10,873	\$11,630	\$13,909
Census Region									
Northeast	274	\$10,785	\$8,865	\$9,749	\$10,260	\$10,729	\$11,293	\$11,896	\$13,295
Midwest	291	\$10,518	\$8,929	\$9,644	\$9,984	\$10,490	\$11,032	\$11,474	\$12,590
South	535	\$10,547	\$8,825	\$9,592	\$10,031	\$10,494	\$11,028	\$11,563	\$12,724
West	174	\$10,344	\$8,541	\$9,313	\$9,880	\$10,319	\$10,825	\$11,293	\$12,318
Census Division									
New England	88	\$10,637	\$8,841	\$9,720	\$10,208	\$10,678	\$11,071	\$11,552	\$12,259
Middle Atlantic	186	\$10,855	\$8,865	\$9,826	\$10,276	\$10,775	\$11,344	\$11,965	\$13,498
East North Central	204	\$10,591	\$9,092	\$9,748	\$10,081	\$10,560	\$11,037	\$11,709	\$12,590

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
West North Central	87	\$10,346	\$8,766	\$9,400	\$9,864	\$10,235	\$10,966	\$11,366	\$12,080
South Atlantic	303	\$10,527	\$8,823	\$9,470	\$10,023	\$10,437	\$11,025	\$11,583	\$12,523
Each South Central	108	\$10,538	\$9,180	\$9,713	\$10,090	\$10,508	\$10,984	\$11,491	\$11,843
West South Central	124	\$10,604	\$8,872	\$9,596	\$10,024	\$10,534	\$11,055	\$11,515	\$13,943
Mountain	66	\$10,237	\$8,931	\$9,277	\$9,866	\$10,203	\$10,612	\$11,078	\$12,318
Pacific	108	\$10,410	\$8,541	\$9,362	\$9,904	\$10,385	\$10,980	\$11,427	\$11,805
Provider Risk Score Decile									
1st	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2nd	8	\$10,129	\$8,338	\$8,338	\$9,719	\$9,966	\$10,938	\$11,452	\$11,452
3rd	24	\$10,621	\$9,067	\$9,536	\$9,908	\$10,456	\$10,965	\$11,714	\$13,909
4th	73	\$10,548	\$8,449	\$9,470	\$10,013	\$10,467	\$11,164	\$11,745	\$13,055
5th	234	\$10,544	\$8,825	\$9,463	\$9,980	\$10,393	\$11,075	\$11,656	\$13,500
6th	426	\$10,581	\$8,989	\$9,671	\$10,116	\$10,524	\$11,040	\$11,602	\$12,474
7th	377	\$10,549	\$8,847	\$9,657	\$10,081	\$10,538	\$11,018	\$11,426	\$12,318
8th	123	\$10,620	\$8,929	\$9,596	\$10,067	\$10,665	\$11,084	\$11,655	\$13,295
9th	9	\$10,515	\$9,163	\$9,163	\$10,013	\$10,378	\$11,238	\$11,770	\$11,770
10th	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Number of Episodes									
10-19 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
20-39 Episodes	662	\$10,600	\$8,825	\$9,425	\$9,967	\$10,561	\$11,187	\$11,769	\$13,354
30-59 Episodes	276	\$10,445	\$8,872	\$9,535	\$10,056	\$10,381	\$10,899	\$11,299	\$12,590
60-79 Episodes	120	\$10,550	\$9,189	\$9,835	\$10,124	\$10,534	\$10,954	\$11,360	\$11,969
80-99 Episodes	66	\$10,571	\$9,266	\$9,786	\$10,159	\$10,534	\$10,916	\$11,430	\$11,994
100-199 Episodes	128	\$10,623	\$9,466	\$9,931	\$10,271	\$10,619	\$10,970	\$11,293	\$11,843
200-299 Episodes	17	\$10,683	\$10,013	\$10,305	\$10,400	\$10,532	\$10,768	\$11,605	\$11,701
300+ Episodes	5	\$10,573	\$10,207	\$10,207	\$10,460	\$10,582	\$10,742	\$10,875	\$10,875

Table 11-B. Lower Gastrointestinal Hemorrhage, TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	137	\$11,663	\$9,446	\$10,435	\$10,923	\$11,598	\$12,254	\$13,155	\$14,714
Urban/Rural									
Urban	126	\$11,678	\$9,446	\$10,435	\$10,917	\$11,613	\$12,264	\$13,155	\$14,714
Rural	11	\$11,491	\$9,902	\$10,898	\$10,941	\$11,383	\$11,977	\$12,547	\$13,157
Census Region									
Northeast	31	\$12,023	\$10,436	\$10,890	\$11,206	\$11,916	\$12,725	\$13,200	\$13,876
Midwest	33	\$11,412	\$9,875	\$10,726	\$11,006	\$11,508	\$11,803	\$12,093	\$12,937
South	69	\$11,653	\$8,712	\$10,068	\$10,862	\$11,534	\$12,264	\$13,346	\$14,804
West	4	\$11,113	\$10,788	\$10,788	\$10,939	\$11,178	\$11,287	\$11,309	\$11,309
Census Division									
New England	10	\$12,200	\$10,436	\$10,872	\$11,382	\$12,245	\$12,971	\$13,538	\$13,876
Middle Atlantic	21	\$11,938	\$10,546	\$10,890	\$11,096	\$11,661	\$12,692	\$13,155	\$13,788
East North Central	26	\$11,551	\$9,875	\$10,543	\$11,107	\$11,643	\$12,001	\$12,484	\$12,937
West North Central	7	\$10,893	\$10,726	\$10,726	\$10,749	\$10,874	\$11,021	\$11,086	\$11,086
South Atlantic	34	\$11,554	\$8,712	\$10,089	\$10,862	\$11,494	\$12,212	\$13,157	\$14,136
Each South Central	24	\$11,746	\$9,446	\$10,406	\$10,838	\$11,375	\$12,259	\$13,678	\$14,804
West South Central	11	\$11,754	\$9,902	\$10,014	\$10,421	\$11,784	\$12,705	\$12,942	\$13,441
Mountain	1	\$11,309	\$11,309	\$11,309	\$11,309	\$11,309	\$11,309	\$11,309	\$11,309
Pacific	3	\$11,048	\$10,788	\$10,788	\$10,788	\$11,091	\$11,265	\$11,265	\$11,265
Provider Risk Score Decile									
1st	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2nd	1	\$8,712	\$8,712	\$8,712	\$8,712	\$8,712	\$8,712	\$8,712	\$8,712
3rd	3	\$11,299	\$10,089	\$10,089	\$10,089	\$11,757	\$12,051	\$12,051	\$12,051
4th	14	\$11,410	\$10,377	\$10,435	\$10,819	\$11,351	\$11,977	\$12,212	\$13,157
5th	44	\$11,818	\$9,790	\$10,436	\$10,976	\$11,676	\$12,715	\$13,441	\$13,876
6th	51	\$11,543	\$9,446	\$10,546	\$10,995	\$11,508	\$12,264	\$12,692	\$13,600
7th	22	\$11,919	\$10,068	\$10,726	\$11,091	\$11,637	\$12,572	\$14,136	\$14,804
8th	2	\$12,255	\$11,355	\$11,355	\$11,355	\$12,255	\$13,155	\$13,155	\$13,155

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
9th	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
10th	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Number of Episodes									
10-19 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
20-39 Episodes	131	\$11,671	\$9,446	\$10,436	\$10,923	\$11,598	\$12,264	\$13,155	\$14,714
30-59 Episodes	6	\$11,475	\$10,421	\$10,421	\$10,819	\$11,546	\$11,871	\$12,647	\$12,647
60-79 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
80-99 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
100-199 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
200-299 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
300+ Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table 12-A. Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels, TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	1,440	\$36,631	\$29,418	\$32,878	\$34,478	\$36,282	\$38,427	\$41,033	\$46,349
Sub-group									
One-level Lumbar Fusion	1,436	\$33,891	\$27,365	\$30,465	\$31,702	\$33,346	\$35,463	\$37,990	\$45,947
Two-level Lumbar Fusion	1,417	\$39,395	\$28,783	\$33,426	\$35,788	\$38,933	\$42,258	\$46,191	\$57,004
Three-level Lumbar Fusion	1,071	\$44,387	\$27,903	\$34,916	\$38,750	\$43,126	\$48,461	\$55,814	\$70,105
Urban/Rural									
Urban	1,323	\$36,694	\$29,058	\$32,966	\$34,557	\$36,321	\$38,510	\$41,111	\$46,509
Rural	116	\$35,931	\$30,889	\$32,300	\$33,533	\$35,507	\$37,897	\$39,737	\$43,386
Unknown	1	\$35,154	\$35,154	\$35,154	\$35,154	\$35,154	\$35,154	\$35,154	\$35,154
Census Region									
Northeast	208	\$37,432	\$31,175	\$33,470	\$35,439	\$37,025	\$39,238	\$41,573	\$44,941
Midwest	308	\$36,544	\$30,351	\$32,940	\$34,513	\$36,061	\$37,885	\$40,440	\$47,195
South	595	\$36,629	\$28,898	\$32,791	\$34,544	\$36,281	\$38,563	\$41,102	\$46,531
West	326	\$36,236	\$29,498	\$32,735	\$34,104	\$35,803	\$37,761	\$41,111	\$44,896
Unknown	3	\$33,179	\$31,115	\$31,115	\$31,115	\$33,268	\$35,154	\$35,154	\$35,154
Census Division									
New England	82	\$37,845	\$29,549	\$33,999	\$35,830	\$37,188	\$39,509	\$42,389	\$61,371
Middle Atlantic	126	\$37,164	\$31,730	\$33,369	\$34,959	\$37,001	\$39,069	\$40,718	\$44,390
East North Central	199	\$36,944	\$28,832	\$33,157	\$34,810	\$36,519	\$38,097	\$41,100	\$51,285
West North Central	109	\$35,815	\$30,950	\$32,676	\$33,957	\$35,367	\$37,673	\$40,128	\$44,421
South Atlantic	308	\$36,203	\$27,542	\$32,458	\$34,402	\$36,048	\$38,057	\$40,334	\$44,822
Each South Central	91	\$35,947	\$28,907	\$32,855	\$34,414	\$35,777	\$37,663	\$38,802	\$43,001
West South Central	196	\$37,616	\$30,330	\$32,922	\$34,913	\$37,266	\$39,566	\$42,613	\$48,724
Mountain	150	\$36,407	\$29,617	\$33,006	\$34,163	\$35,814	\$37,919	\$40,714	\$44,011
Pacific	176	\$36,091	\$28,075	\$32,204	\$33,827	\$35,761	\$37,665	\$41,461	\$44,925
Unknown	3	\$33,179	\$31,115	\$31,115	\$31,115	\$33,268	\$35,154	\$35,154	\$35,154
Provider Risk Score Decile									
1st	74	\$35,592	\$16,274	\$28,317	\$31,939	\$35,269	\$38,088	\$43,132	\$58,787
2nd	81	\$35,896	\$29,498	\$32,190	\$33,766	\$35,730	\$37,680	\$40,371	\$47,076
3rd	142	\$36,244	\$29,915	\$32,797	\$34,125	\$35,790	\$38,140	\$40,468	\$46,144
4th	175	\$36,325	\$30,393	\$33,171	\$34,557	\$35,785	\$37,708	\$40,592	\$44,932
5th	190	\$36,724	\$30,475	\$33,055	\$34,719	\$36,422	\$38,423	\$40,888	\$45,511
6th	190	\$37,318	\$30,862	\$32,954	\$34,646	\$36,924	\$39,545	\$41,408	\$48,724
7th	183	\$36,580	\$29,821	\$33,088	\$34,495	\$36,252	\$38,313	\$40,321	\$46,349
8th	167	\$36,613	\$30,950	\$32,734	\$34,648	\$36,293	\$38,486	\$40,733	\$47,091
9th	127	\$37,216	\$31,811	\$33,337	\$34,829	\$36,453	\$39,014	\$41,896	\$45,932
10th	111	\$36,944	\$33,268	\$34,283	\$35,320	\$36,654	\$38,190	\$40,117	\$43,175
Number of Episodes									
10-19 Episodes	548	\$36,720	\$28,832	\$32,403	\$34,126	\$36,321	\$38,853	\$41,711	\$47,195
20-39 Episodes	503	\$36,623	\$29,821	\$32,859	\$34,479	\$36,280	\$38,430	\$41,100	\$46,531
30-59 Episodes	152	\$36,808	\$31,429	\$33,677	\$34,775	\$36,856	\$38,441	\$40,214	\$44,485
60-79 Episodes	104	\$36,365	\$29,617	\$33,734	\$34,684	\$35,830	\$37,549	\$40,321	\$42,600

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
80-99 Episodes	50	\$36,297	\$32,196	\$34,167	\$35,189	\$36,123	\$37,171	\$38,585	\$41,562
100-199 Episodes	70	\$36,355	\$32,363	\$34,316	\$35,069	\$36,276	\$37,692	\$38,794	\$41,133
200-299 Episodes	12	\$36,147	\$33,895	\$34,123	\$35,144	\$35,762	\$37,076	\$37,584	\$40,403
300+ Episodes	1	\$34,353	\$34,353	\$34,353	\$34,353	\$34,353	\$34,353	\$34,353	\$34,353

Table 12-B. Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels, TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	3,286	\$36,537	\$29,697	\$32,630	\$34,156	\$36,062	\$38,317	\$41,316	\$47,466
Sub-group									
One-level Lumbar Fusion	3,266	\$33,750	\$26,934	\$30,156	\$31,426	\$33,132	\$35,384	\$38,083	\$46,049
Two-level Lumbar Fusion	3,190	\$39,441	\$28,727	\$32,863	\$35,267	\$38,538	\$42,494	\$47,378	\$59,783
Three-level Lumbar Fusion	2,175	\$44,287	\$27,577	\$33,910	\$37,621	\$42,238	\$48,841	\$57,271	\$78,462
Urban/Rural									
Urban	3,040	\$36,581	\$29,695	\$32,671	\$34,192	\$36,110	\$38,336	\$41,370	\$47,577
Rural	244	\$35,996	\$30,475	\$32,224	\$33,515	\$35,255	\$37,854	\$40,163	\$46,138
Unknown	2	\$35,283	\$34,592	\$34,592	\$34,592	\$35,283	\$35,973	\$35,973	\$35,973
Census Region									
Northeast	408	\$37,225	\$31,158	\$33,393	\$34,897	\$36,752	\$38,950	\$42,068	\$47,194
Midwest	734	\$36,631	\$30,284	\$32,694	\$34,067	\$36,137	\$38,235	\$41,435	\$49,737
South	1,476	\$36,543	\$28,505	\$32,437	\$34,202	\$36,066	\$38,427	\$41,476	\$47,908
West	664	\$36,013	\$29,613	\$32,555	\$33,774	\$35,630	\$37,848	\$40,297	\$44,650
Unknown	4	\$33,735	\$31,110	\$31,110	\$32,187	\$33,928	\$35,283	\$35,973	\$35,973
Census Division									
New England	166	\$37,686	\$29,808	\$34,020	\$35,358	\$36,931	\$39,516	\$42,935	\$47,194
Middle Atlantic	242	\$36,909	\$31,467	\$33,127	\$34,551	\$36,687	\$38,320	\$41,467	\$47,243
East North Central	455	\$36,956	\$30,270	\$32,734	\$34,412	\$36,410	\$38,574	\$41,861	\$51,278
West North Central	279	\$36,099	\$30,284	\$32,439	\$33,527	\$35,666	\$37,828	\$40,742	\$47,945
South Atlantic	836	\$36,281	\$27,846	\$32,243	\$34,061	\$36,012	\$38,023	\$41,105	\$47,908
Each South Central	241	\$36,371	\$31,123	\$32,850	\$34,487	\$35,963	\$38,313	\$39,327	\$45,664
West South Central	399	\$37,198	\$29,697	\$32,660	\$34,237	\$36,386	\$39,604	\$43,137	\$49,535
Mountain	330	\$36,280	\$30,268	\$32,567	\$34,158	\$35,844	\$38,072	\$40,463	\$45,717
Pacific	334	\$35,749	\$28,072	\$32,292	\$33,584	\$35,390	\$37,665	\$40,074	\$43,378
Unknown	4	\$33,735	\$31,110	\$31,110	\$32,187	\$33,928	\$35,283	\$35,973	\$35,973
Provider Risk Score Decile									
1st	186	\$36,244	\$20,423	\$29,545	\$33,227	\$35,652	\$39,260	\$43,011	\$57,207
2nd	174	\$36,233	\$26,886	\$32,384	\$33,595	\$35,532	\$37,916	\$41,786	\$48,132
3rd	314	\$35,888	\$29,911	\$32,390	\$33,506	\$35,255	\$37,446	\$40,227	\$46,217
4th	383	\$36,182	\$30,716	\$32,492	\$34,004	\$35,866	\$37,749	\$40,711	\$44,707
5th	440	\$36,378	\$30,284	\$32,390	\$34,275	\$36,143	\$38,114	\$40,270	\$46,422
6th	462	\$36,757	\$30,940	\$32,806	\$34,421	\$36,244	\$38,574	\$41,476	\$47,189
7th	405	\$36,894	\$30,774	\$32,840	\$34,394	\$36,413	\$38,849	\$41,518	\$48,043
8th	382	\$36,845	\$30,459	\$32,662	\$34,038	\$36,494	\$39,098	\$41,904	\$47,666
9th	313	\$36,973	\$30,501	\$33,250	\$34,584	\$36,377	\$38,740	\$41,427	\$48,589
10th	227	\$36,611	\$32,573	\$33,591	\$34,554	\$36,111	\$38,085	\$40,639	\$43,750
Number of Episodes									
10-19 Episodes	2,105	\$36,675	\$29,286	\$32,653	\$34,237	\$36,166	\$38,663	\$41,499	\$47,632
20-39 Episodes	998	\$36,421	\$30,459	\$32,574	\$34,018	\$36,008	\$37,899	\$41,168	\$47,577
30-59 Episodes	132	\$35,714	\$30,410	\$32,503	\$34,079	\$35,479	\$37,247	\$39,604	\$41,654
60-79 Episodes	42	\$35,102	\$29,493	\$32,284	\$34,000	\$34,825	\$36,501	\$37,686	\$40,991
80-99 Episodes	6	\$36,174	\$34,120	\$34,120	\$34,649	\$35,921	\$36,955	\$39,478	\$39,478
100-199 Episodes	3	\$35,503	\$34,865	\$34,865	\$34,865	\$35,056	\$36,589	\$36,589	\$36,589
200-299 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
300+ Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table 13-A. Lumpectomy, Partial Mastectomy, Simple Mastectomy, TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	1,210	\$5,795	\$4,077	\$4,955	\$5,395	\$5,803	\$6,197	\$6,627	\$7,353
Sub-group									
Bilateral Total Mastectomy	700	\$6,692	\$2,787	\$4,876	\$5,680	\$6,402	\$7,506	\$8,744	\$12,578
Unilateral Partial Mastectomy with SLN	1,106	\$6,354	\$3,851	\$5,225	\$5,939	\$6,401	\$6,863	\$7,308	\$8,351
Unilateral Partial Mastectomy without SLN	1,196	\$4,723	\$2,644	\$3,590	\$4,086	\$4,661	\$5,288	\$5,933	\$7,629
Unilateral Total Mastectomy	1,137	\$6,347	\$3,903	\$5,333	\$5,777	\$6,220	\$6,763	\$7,526	\$10,276
Urban/Rural									
Urban	1,050	\$5,775	\$4,040	\$4,929	\$5,369	\$5,795	\$6,174	\$6,620	\$7,360
Rural	159	\$5,926	\$4,592	\$5,139	\$5,495	\$5,879	\$6,378	\$6,769	\$7,259
Unknown	1	\$6,138	\$6,138	\$6,138	\$6,138	\$6,138	\$6,138	\$6,138	\$6,138
Census Region									
Northeast	212	\$5,926	\$4,250	\$5,013	\$5,479	\$5,951	\$6,363	\$6,771	\$7,350
Midwest	300	\$5,818	\$4,331	\$5,088	\$5,474	\$5,806	\$6,193	\$6,573	\$7,183
South	476	\$5,738	\$3,881	\$4,939	\$5,340	\$5,749	\$6,128	\$6,599	\$7,343
West	221	\$5,759	\$3,987	\$4,745	\$5,351	\$5,793	\$6,174	\$6,536	\$7,428
Unknown	1	\$6,138	\$6,138	\$6,138	\$6,138	\$6,138	\$6,138	\$6,138	\$6,138
Census Division									
New England	72	\$6,105	\$4,767	\$5,256	\$5,724	\$6,166	\$6,447	\$6,755	\$7,350
Middle Atlantic	140	\$5,833	\$4,001	\$4,928	\$5,356	\$5,846	\$6,285	\$6,776	\$7,355
East North Central	202	\$5,805	\$4,290	\$5,084	\$5,460	\$5,840	\$6,174	\$6,559	\$7,073
West North Central	98	\$5,845	\$4,447	\$5,103	\$5,519	\$5,762	\$6,290	\$6,686	\$7,511
South Atlantic	258	\$5,815	\$4,100	\$4,973	\$5,386	\$5,763	\$6,253	\$6,761	\$7,468
Each South Central	90	\$5,637	\$3,615	\$4,893	\$5,244	\$5,683	\$6,057	\$6,307	\$7,343
West South Central	128	\$5,653	\$3,881	\$4,880	\$5,358	\$5,745	\$5,986	\$6,364	\$7,076
Mountain	81	\$5,796	\$3,987	\$4,745	\$5,394	\$5,883	\$6,197	\$6,536	\$7,884
Pacific	140	\$5,737	\$3,876	\$4,752	\$5,333	\$5,775	\$6,168	\$6,534	\$7,428
Unknown	1	\$6,138	\$6,138	\$6,138	\$6,138	\$6,138	\$6,138	\$6,138	\$6,138
Provider Risk Score Decile									
1st	25	\$5,820	\$4,544	\$4,774	\$5,117	\$5,328	\$6,602	\$7,317	\$8,045
2nd	127	\$6,067	\$3,615	\$4,935	\$5,492	\$6,181	\$6,706	\$7,255	\$7,623
3rd	173	\$5,875	\$3,606	\$4,955	\$5,529	\$5,933	\$6,262	\$6,791	\$7,384
4th	195	\$5,727	\$4,001	\$4,862	\$5,340	\$5,760	\$6,152	\$6,505	\$7,206
5th	193	\$5,711	\$4,040	\$4,880	\$5,386	\$5,726	\$6,152	\$6,513	\$7,147
6th	193	\$5,760	\$4,100	\$4,955	\$5,369	\$5,798	\$6,128	\$6,548	\$7,274
7th	153	\$5,713	\$4,440	\$5,120	\$5,336	\$5,665	\$6,098	\$6,390	\$7,307
8th	83	\$5,802	\$4,246	\$4,980	\$5,468	\$5,808	\$6,166	\$6,457	\$7,468
9th	54	\$5,767	\$4,244	\$5,139	\$5,494	\$5,854	\$5,994	\$6,255	\$6,923
10th	14	\$5,821	\$5,106	\$5,485	\$5,625	\$5,838	\$6,051	\$6,161	\$6,423
Number of Episodes									
10-19 Episodes	459	\$5,801	\$3,876	\$4,939	\$5,396	\$5,806	\$6,251	\$6,650	\$7,360
20-39 Episodes	386	\$5,842	\$4,290	\$4,944	\$5,362	\$5,822	\$6,249	\$6,839	\$7,468
30-59 Episodes	164	\$5,729	\$4,242	\$4,764	\$5,306	\$5,812	\$6,148	\$6,540	\$7,272
60-79 Episodes	66	\$5,732	\$3,476	\$5,067	\$5,402	\$5,798	\$6,018	\$6,434	\$7,253
80-99 Episodes	54	\$5,665	\$4,476	\$4,953	\$5,326	\$5,650	\$6,044	\$6,271	\$6,876
100-199 Episodes	67	\$5,774	\$4,100	\$5,294	\$5,599	\$5,770	\$6,044	\$6,248	\$7,321
200-299 Episodes	7	\$5,806	\$5,081	\$5,081	\$5,387	\$5,745	\$6,260	\$6,774	\$6,774
300+ Episodes	7	\$6,094	\$5,894	\$5,894	\$5,918	\$6,050	\$6,285	\$6,356	\$6,356

Table 13-B. Lumpectomy, Partial Mastectomy, Simple Mastectomy, TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	1,734	\$5,832	\$3,909	\$4,902	\$5,393	\$5,847	\$6,303	\$6,724	\$7,639
Sub-group									
Bilateral Total Mastectomy	870	\$6,760	\$2,646	\$4,342	\$5,670	\$6,529	\$7,612	\$9,117	\$13,666
Unilateral Partial Mastectomy with SLN	1,580	\$6,403	\$3,791	\$5,011	\$5,948	\$6,507	\$6,995	\$7,490	\$8,926
Unilateral Partial Mastectomy without SLN	1,693	\$4,685	\$2,231	\$3,459	\$3,974	\$4,599	\$5,330	\$6,050	\$7,839
Unilateral Total Mastectomy	1,513	\$6,406	\$3,350	\$5,015	\$5,698	\$6,264	\$6,939	\$7,813	\$11,610
Urban/Rural									
Urban	1,606	\$5,813	\$3,900	\$4,871	\$5,375	\$5,834	\$6,284	\$6,716	\$7,639
Rural	128	\$6,068	\$4,860	\$5,270	\$5,639	\$6,000	\$6,520	\$6,855	\$7,379
Census Region									
Northeast	317	\$5,952	\$3,856	\$5,038	\$5,497	\$6,001	\$6,415	\$6,829	\$7,660
Midwest	417	\$5,843	\$4,122	\$4,935	\$5,415	\$5,830	\$6,306	\$6,722	\$7,381
South	673	\$5,792	\$3,882	\$4,894	\$5,354	\$5,783	\$6,239	\$6,722	\$7,749
West	327	\$5,782	\$3,895	\$4,692	\$5,393	\$5,870	\$6,234	\$6,608	\$7,406
Census Division									
New England	113	\$6,213	\$4,762	\$5,322	\$5,826	\$6,272	\$6,646	\$6,908	\$7,639
Middle Atlantic	204	\$5,808	\$3,813	\$4,773	\$5,297	\$5,855	\$6,323	\$6,714	\$7,660
East North Central	278	\$5,793	\$3,970	\$4,860	\$5,369	\$5,828	\$6,278	\$6,600	\$7,251
West North Central	139	\$5,944	\$4,477	\$5,038	\$5,483	\$5,841	\$6,456	\$6,974	\$7,464
South Atlantic	410	\$5,836	\$4,070	\$4,970	\$5,386	\$5,804	\$6,308	\$6,792	\$7,763
Each South Central	99	\$5,704	\$3,166	\$4,691	\$5,232	\$5,748	\$6,180	\$6,654	\$8,904
West South Central	164	\$5,734	\$3,827	\$4,870	\$5,418	\$5,735	\$6,163	\$6,570	\$7,270
Mountain	125	\$5,862	\$4,083	\$4,981	\$5,429	\$5,950	\$6,263	\$6,697	\$7,406
Pacific	202	\$5,732	\$3,880	\$4,677	\$5,346	\$5,801	\$6,203	\$6,546	\$7,389
Provider Risk Score Decile									
1st	46	\$5,834	\$3,406	\$4,562	\$5,119	\$5,687	\$6,667	\$7,692	\$8,085
2nd	202	\$6,056	\$4,029	\$4,669	\$5,478	\$6,223	\$6,722	\$7,251	\$7,763
3rd	269	\$5,869	\$3,734	\$4,950	\$5,416	\$5,883	\$6,366	\$6,941	\$7,442
4th	354	\$5,812	\$3,895	\$4,890	\$5,384	\$5,866	\$6,300	\$6,578	\$7,656
5th	338	\$5,758	\$3,827	\$4,890	\$5,354	\$5,820	\$6,217	\$6,652	\$7,065
6th	257	\$5,767	\$4,127	\$4,979	\$5,423	\$5,783	\$6,201	\$6,516	\$7,387
7th	151	\$5,809	\$4,170	\$5,017	\$5,419	\$5,862	\$6,213	\$6,570	\$7,034
8th	69	\$5,747	\$4,122	\$4,935	\$5,392	\$5,753	\$6,102	\$6,602	\$7,505
9th	37	\$5,881	\$4,628	\$5,238	\$5,510	\$5,895	\$6,251	\$6,536	\$6,697
10th	11	\$5,817	\$4,995	\$5,554	\$5,558	\$5,844	\$6,100	\$6,309	\$6,313
Number of Episodes									
10-19 Episodes	962	\$5,843	\$3,895	\$4,890	\$5,390	\$5,869	\$6,314	\$6,789	\$7,576
20-39 Episodes	591	\$5,801	\$3,927	\$4,867	\$5,346	\$5,825	\$6,274	\$6,712	\$7,660
30-59 Episodes	141	\$5,910	\$4,692	\$5,211	\$5,559	\$5,875	\$6,316	\$6,588	\$7,645
60-79 Episodes	28	\$5,743	\$3,418	\$4,329	\$5,582	\$5,761	\$6,170	\$6,445	\$7,763
80-99 Episodes	10	\$5,808	\$4,498	\$4,758	\$5,708	\$5,862	\$6,261	\$6,478	\$6,667
100-199 Episodes	2	\$4,949	\$4,120	\$4,120	\$4,120	\$4,949	\$5,777	\$5,777	\$5,777
200-299 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
300+ Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table 14-A. Non-Emergent Coronary Artery Bypass Graft (CABG), TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	863	\$42,903	\$37,341	\$39,181	\$40,478	\$42,175	\$44,635	\$47,442	\$55,062
Sub-group									

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
CABG with Concurrent Aortic Valve Replacement	806	\$53,506	\$42,098	\$46,596	\$48,852	\$52,031	\$56,039	\$62,862	\$79,247
Isolated CABG	863	\$41,294	\$35,683	\$37,596	\$38,975	\$40,558	\$43,016	\$45,856	\$54,085
Urban/Rural									
Urban	801	\$42,807	\$37,414	\$39,163	\$40,419	\$42,129	\$44,528	\$47,236	\$54,736
Rural	61	\$44,154	\$37,341	\$39,493	\$41,037	\$43,418	\$46,018	\$49,039	\$62,379
Unknown	1	\$43,680	\$43,680	\$43,680	\$43,680	\$43,680	\$43,680	\$43,680	\$43,680
Census Region									
Northeast	134	\$41,992	\$36,567	\$38,557	\$39,840	\$41,542	\$43,556	\$45,080	\$51,892
Midwest	204	\$43,355	\$37,743	\$39,210	\$40,680	\$42,513	\$44,901	\$48,278	\$56,308
South	327	\$42,818	\$37,545	\$39,300	\$40,519	\$42,011	\$44,476	\$47,236	\$54,736
West	196	\$43,220	\$34,326	\$39,411	\$40,707	\$42,416	\$45,486	\$47,790	\$54,386
Unknown	2	\$40,641	\$37,603	\$37,603	\$37,603	\$40,641	\$43,680	\$43,680	\$43,680
Census Division									
New England	31	\$41,493	\$36,567	\$38,976	\$40,115	\$41,323	\$42,346	\$44,474	\$47,023
Middle Atlantic	103	\$42,142	\$37,535	\$38,557	\$39,766	\$41,575	\$43,791	\$45,188	\$51,892
East North Central	135	\$43,994	\$37,743	\$39,498	\$40,983	\$43,056	\$46,030	\$50,861	\$58,025
West North Central	69	\$42,104	\$37,341	\$39,116	\$40,269	\$41,368	\$43,523	\$46,474	\$49,832
South Atlantic	151	\$43,356	\$37,938	\$39,493	\$40,660	\$42,793	\$45,500	\$47,742	\$55,062
Each South Central	60	\$41,839	\$37,283	\$39,390	\$39,718	\$41,082	\$42,157	\$45,021	\$65,345
West South Central	116	\$42,626	\$37,475	\$39,109	\$40,730	\$42,135	\$44,254	\$46,761	\$51,788
Mountain	67	\$42,910	\$34,326	\$39,566	\$40,880	\$42,436	\$45,014	\$47,392	\$48,941
Pacific	129	\$43,381	\$35,751	\$39,239	\$40,525	\$42,395	\$45,676	\$48,476	\$54,386
Unknown	2	\$40,641	\$37,603	\$37,603	\$37,603	\$40,641	\$43,680	\$43,680	\$43,680
Provider Risk Score Decile									
1st	55	\$42,926	\$37,611	\$38,858	\$39,633	\$42,427	\$45,099	\$48,439	\$56,308
2nd	87	\$42,568	\$35,918	\$38,791	\$39,546	\$42,129	\$44,532	\$47,545	\$58,682
3rd	100	\$42,988	\$37,848	\$39,605	\$40,665	\$42,197	\$44,428	\$47,078	\$59,346
4th	96	\$43,065	\$37,731	\$39,411	\$40,749	\$42,308	\$45,144	\$47,634	\$52,295
5th	100	\$42,405	\$37,758	\$38,831	\$40,482	\$42,018	\$43,606	\$46,255	\$52,913
6th	100	\$43,393	\$38,145	\$39,634	\$40,967	\$42,649	\$45,092	\$46,866	\$58,382
7th	101	\$42,931	\$36,943	\$39,686	\$40,498	\$42,092	\$44,715	\$47,669	\$54,736
8th	95	\$42,867	\$37,880	\$39,126	\$40,555	\$42,209	\$45,080	\$47,394	\$58,025
9th	87	\$43,023	\$35,751	\$39,236	\$40,592	\$42,039	\$44,350	\$48,836	\$56,304
10th	42	\$42,782	\$33,516	\$39,158	\$40,537	\$41,614	\$44,726	\$48,027	\$55,530
Number of Episodes									
10-19 Episodes	209	\$43,690	\$36,232	\$38,863	\$40,537	\$43,078	\$46,018	\$50,418	\$56,308
20-39 Episodes	254	\$43,231	\$37,535	\$39,181	\$40,637	\$42,562	\$45,093	\$47,545	\$55,530
30-59 Episodes	142	\$42,741	\$37,987	\$39,006	\$40,303	\$42,034	\$45,080	\$46,978	\$52,295
60-79 Episodes	88	\$42,670	\$38,240	\$39,413	\$40,601	\$41,916	\$43,739	\$47,446	\$54,386
80-99 Episodes	59	\$41,448	\$37,458	\$39,258	\$40,194	\$41,262	\$42,386	\$43,414	\$47,903
100-199 Episodes	94	\$41,778	\$37,938	\$39,227	\$40,174	\$41,491	\$43,042	\$44,111	\$48,404
200-299 Episodes	14	\$41,919	\$38,824	\$39,754	\$40,670	\$41,552	\$43,193	\$44,400	\$45,923
300+ Episodes	3	\$43,329	\$42,328	\$42,328	\$42,328	\$43,126	\$44,533	\$44,533	\$44,533

Table 14-B. Non-Emergent Coronary Artery Bypass Graft (CABG), TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	2,615	\$42,515	\$36,330	\$38,721	\$40,012	\$41,861	\$44,136	\$47,051	\$55,348
Sub-group									
CABG with Concurrent Aortic Valve Replacement	2,272	\$53,219	\$41,110	\$45,627	\$47,963	\$51,307	\$56,413	\$63,299	\$83,351
Isolated CABG	2,615	\$40,870	\$34,662	\$36,993	\$38,402	\$40,280	\$42,518	\$45,451	\$53,208
Urban/Rural									
Urban	2,428	\$42,477	\$36,307	\$38,701	\$39,968	\$41,846	\$44,119	\$46,970	\$55,348
Rural	186	\$43,004	\$37,258	\$39,272	\$40,553	\$41,982	\$44,609	\$48,383	\$56,498

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
Unknown	1	\$43,629	\$43,629	\$43,629	\$43,629	\$43,629	\$43,629	\$43,629	\$43,629
Census Region									
Northeast	431	\$41,489	\$35,943	\$37,766	\$39,489	\$41,226	\$43,280	\$45,086	\$51,036
Midwest	655	\$42,714	\$36,900	\$38,848	\$40,285	\$42,026	\$44,335	\$47,752	\$54,529
South	1,092	\$42,543	\$36,956	\$38,899	\$40,008	\$41,830	\$43,968	\$46,849	\$56,975
West	435	\$43,168	\$35,710	\$39,050	\$40,493	\$42,539	\$45,391	\$48,006	\$55,785
Unknown	2	\$40,594	\$37,559	\$37,559	\$37,559	\$40,594	\$43,629	\$43,629	\$43,629
Census Division									
New England	136	\$41,249	\$35,943	\$37,334	\$39,759	\$41,192	\$42,721	\$44,962	\$47,475
Middle Atlantic	295	\$41,600	\$35,529	\$37,769	\$39,406	\$41,272	\$43,424	\$45,300	\$53,061
East North Central	464	\$43,087	\$37,312	\$39,150	\$40,489	\$42,353	\$44,630	\$48,456	\$54,828
West North Central	191	\$41,809	\$36,483	\$38,514	\$39,611	\$41,339	\$43,462	\$46,232	\$50,887
South Atlantic	573	\$42,740	\$36,631	\$38,822	\$40,068	\$42,068	\$44,404	\$47,924	\$55,674
Each South Central	225	\$41,761	\$37,133	\$38,848	\$39,685	\$40,828	\$42,532	\$44,737	\$66,281
West South Central	294	\$42,756	\$36,780	\$39,038	\$40,348	\$42,205	\$44,265	\$46,712	\$59,514
Mountain	144	\$42,717	\$34,286	\$38,928	\$40,522	\$42,559	\$44,558	\$46,681	\$55,785
Pacific	291	\$43,391	\$35,710	\$39,088	\$40,490	\$42,526	\$45,701	\$48,332	\$56,980
Unknown	2	\$40,594	\$37,559	\$37,559	\$37,559	\$40,594	\$43,629	\$43,629	\$43,629
Provider Risk Score Decile									
1st	93	\$42,879	\$36,551	\$39,283	\$40,487	\$42,452	\$44,561	\$47,400	\$55,311
2nd	259	\$42,522	\$36,448	\$38,697	\$40,049	\$41,722	\$44,156	\$46,611	\$55,927
3rd	314	\$42,348	\$36,819	\$38,382	\$39,701	\$41,372	\$43,872	\$47,596	\$56,975
4th	341	\$42,527	\$36,301	\$39,038	\$40,175	\$41,922	\$44,210	\$46,819	\$53,366
5th	335	\$42,499	\$36,261	\$38,883	\$40,137	\$41,853	\$43,933	\$46,621	\$55,674
6th	325	\$42,503	\$36,631	\$38,956	\$40,175	\$41,941	\$44,241	\$46,872	\$53,296
7th	320	\$42,596	\$36,900	\$38,310	\$39,825	\$42,015	\$44,621	\$47,121	\$54,908
8th	294	\$42,715	\$36,141	\$38,797	\$40,105	\$42,123	\$44,135	\$47,051	\$56,498
9th	245	\$42,493	\$36,380	\$38,701	\$39,888	\$41,844	\$43,909	\$47,546	\$54,909
10th	89	\$41,863	\$33,477	\$38,215	\$39,739	\$41,468	\$42,990	\$47,860	\$55,553
Number of Episodes									
10-19 Episodes	1,362	\$42,867	\$36,081	\$38,542	\$39,956	\$42,151	\$44,737	\$48,093	\$56,471
20-39 Episodes	994	\$42,267	\$36,830	\$39,001	\$40,170	\$41,746	\$43,733	\$46,150	\$53,969
30-59 Episodes	194	\$41,714	\$35,876	\$38,888	\$39,701	\$41,326	\$43,218	\$45,185	\$50,485
60-79 Episodes	50	\$41,144	\$37,517	\$38,663	\$39,917	\$41,333	\$42,617	\$43,278	\$45,077
80-99 Episodes	8	\$41,841	\$39,876	\$39,876	\$40,475	\$41,113	\$42,313	\$47,049	\$47,049
100-199 Episodes	7	\$41,865	\$39,133	\$39,133	\$39,231	\$40,587	\$43,077	\$48,548	\$48,548
200-299 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
300+ Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table 15-A. Psychoses / Related Conditions, TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	2,265	\$20,448	\$12,014	\$14,966	\$17,186	\$20,016	\$23,071	\$26,380	\$33,215
Sub-group									
Dementia and Psychosis	1,687	\$25,067	\$5,727	\$11,294	\$17,642	\$24,290	\$31,027	\$38,448	\$60,446
IDD and Psychosis	2,060	\$20,865	\$5,511	\$10,678	\$14,266	\$19,475	\$25,374	\$32,280	\$52,331
Major Depressive Disorder with Psychosis	2,016	\$18,766	\$5,631	\$9,240	\$12,998	\$17,495	\$22,762	\$29,361	\$45,130
Mania or Bipolar with Psychosis	2,098	\$19,219	\$6,157	\$10,806	\$14,196	\$18,213	\$22,640	\$27,922	\$48,531
Other Psychoses	1,798	\$16,389	\$3,678	\$7,893	\$10,580	\$14,730	\$19,814	\$26,843	\$47,841
Schizoaffective Disorders	2,237	\$20,402	\$8,413	\$13,319	\$16,183	\$19,913	\$23,707	\$27,836	\$38,347
Schizophrenia Spectrum Disorders	2,225	\$20,368	\$7,194	\$12,267	\$15,628	\$19,508	\$24,043	\$29,329	\$41,403
Urban/Rural									
Urban	1,944	\$20,734	\$12,407	\$15,443	\$17,456	\$20,258	\$23,292	\$26,520	\$33,309
Rural	319	\$18,686	\$10,958	\$13,284	\$15,467	\$18,067	\$21,477	\$24,004	\$32,535
Unknown	2	\$23,468	\$18,617	\$18,617	\$18,617	\$23,468	\$28,319	\$28,319	\$28,319

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
Census Region									
Northeast	350	\$22,300	\$12,885	\$16,079	\$18,928	\$22,026	\$25,209	\$28,430	\$37,343
Midwest	572	\$19,104	\$11,163	\$14,099	\$16,363	\$18,732	\$21,345	\$24,323	\$31,894
South	912	\$19,720	\$12,030	\$15,014	\$17,031	\$19,442	\$22,127	\$24,705	\$31,901
West	429	\$22,261	\$12,527	\$16,089	\$18,544	\$21,998	\$24,951	\$28,898	\$37,816
Unknown	2	\$23,468	\$18,617	\$18,617	\$18,617	\$23,468	\$28,319	\$28,319	\$28,319
Census Division									
New England	102	\$21,686	\$14,078	\$16,777	\$18,875	\$21,373	\$24,235	\$27,623	\$30,493
Middle Atlantic	248	\$22,553	\$12,885	\$15,951	\$18,935	\$22,127	\$25,517	\$29,127	\$37,508
East North Central	412	\$19,541	\$12,014	\$14,724	\$16,684	\$19,351	\$22,075	\$24,734	\$31,894
West North Central	160	\$17,979	\$10,416	\$13,529	\$14,896	\$17,175	\$20,058	\$22,913	\$31,048
South Atlantic	388	\$18,642	\$11,861	\$14,136	\$16,275	\$18,140	\$20,858	\$23,083	\$31,351
Each South Central	170	\$19,891	\$11,352	\$15,659	\$16,862	\$19,746	\$22,363	\$25,024	\$31,901
West South Central	354	\$20,819	\$13,065	\$16,282	\$18,114	\$20,436	\$23,113	\$25,274	\$33,558
Mountain	124	\$20,598	\$13,284	\$15,773	\$17,398	\$19,542	\$22,963	\$26,918	\$32,974
Pacific	305	\$22,937	\$12,527	\$16,428	\$19,733	\$22,837	\$25,548	\$29,272	\$39,282
Unknown	2	\$23,468	\$18,617	\$18,617	\$18,617	\$23,468	\$28,319	\$28,319	\$28,319
Provider Risk Score Decile									
1st	2	\$17,449	\$12,823	\$12,823	\$12,823	\$17,449	\$22,075	\$22,075	\$22,075
2nd	172	\$18,728	\$10,437	\$13,006	\$15,749	\$17,908	\$20,859	\$24,418	\$41,287
3rd	333	\$19,188	\$11,415	\$13,676	\$15,607	\$18,502	\$22,231	\$25,034	\$31,351
4th	370	\$19,338	\$10,885	\$14,159	\$16,176	\$18,661	\$21,879	\$25,194	\$31,300
5th	362	\$20,212	\$12,014	\$15,099	\$17,259	\$19,832	\$22,449	\$25,375	\$33,195
6th	324	\$21,151	\$13,146	\$16,049	\$17,765	\$20,401	\$23,725	\$26,760	\$32,754
7th	250	\$21,391	\$13,905	\$16,683	\$18,603	\$20,945	\$23,402	\$26,591	\$34,014
8th	186	\$21,076	\$13,756	\$16,473	\$18,501	\$20,465	\$23,441	\$25,602	\$30,450
9th	171	\$22,278	\$14,568	\$17,083	\$19,218	\$22,095	\$24,557	\$27,577	\$34,370
10th	95	\$23,853	\$11,985	\$18,283	\$20,270	\$23,372	\$26,959	\$30,976	\$37,816
Number of Episodes									
10-19 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
20-39 Episodes	756	\$20,408	\$10,885	\$14,151	\$16,734	\$19,752	\$23,187	\$26,949	\$37,816
30-59 Episodes	476	\$20,187	\$12,375	\$15,094	\$17,143	\$19,791	\$22,932	\$26,409	\$31,942
60-79 Episodes	293	\$20,161	\$12,037	\$15,056	\$16,825	\$19,765	\$22,838	\$25,616	\$33,195
80-99 Episodes	194	\$20,026	\$12,014	\$14,922	\$16,775	\$19,344	\$22,625	\$25,213	\$37,343
100-199 Episodes	404	\$20,885	\$12,599	\$16,184	\$18,024	\$20,792	\$23,107	\$25,443	\$31,300
200-299 Episodes	90	\$21,067	\$15,014	\$16,319	\$18,184	\$20,722	\$23,251	\$26,745	\$31,894
300+ Episodes	52	\$22,127	\$14,343	\$17,748	\$19,933	\$22,300	\$24,497	\$26,193	\$31,901

Table 15-B. Psychoses / Related Conditions, TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	5,538	\$24,180	\$13,286	\$17,024	\$19,745	\$23,420	\$27,726	\$32,342	\$41,502
Sub-group									
Dementia and Psychosis	3,681	\$29,217	\$6,403	\$12,243	\$19,499	\$28,051	\$36,605	\$46,798	\$72,002
IDD and Psychosis	4,883	\$24,636	\$5,981	\$11,446	\$15,903	\$22,278	\$30,309	\$40,601	\$69,432
Major Depressive Disorder with Psychosis	4,632	\$22,004	\$5,730	\$10,095	\$14,397	\$20,326	\$27,053	\$35,304	\$58,483
Mania or Bipolar with Psychosis	5,079	\$22,543	\$6,616	\$11,430	\$15,836	\$21,172	\$27,261	\$34,633	\$57,321
Other Psychoses	3,936	\$18,934	\$4,284	\$8,157	\$11,079	\$16,327	\$23,323	\$33,072	\$60,003
Schizoaffective Disorders	5,490	\$24,283	\$9,919	\$15,042	\$18,798	\$23,424	\$28,565	\$34,239	\$47,891
Schizophrenia Spectrum Disorders	5,459	\$24,198	\$8,688	\$13,728	\$17,836	\$22,916	\$29,072	\$36,331	\$51,641
Urban/Rural									
Urban	4,896	\$24,531	\$13,630	\$17,316	\$20,109	\$23,751	\$27,971	\$32,619	\$42,322
Rural	639	\$21,500	\$12,257	\$15,124	\$17,372	\$20,648	\$24,930	\$29,081	\$37,395
Unknown	3	\$23,723	\$19,862	\$19,862	\$19,862	\$20,424	\$30,883	\$30,883	\$30,883
Census Region									

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
Northeast	1,300	\$27,415	\$14,582	\$19,605	\$23,052	\$27,170	\$31,327	\$35,597	\$43,959
Midwest	1,317	\$22,787	\$13,141	\$16,092	\$18,439	\$21,972	\$26,206	\$30,755	\$39,477
South	2,056	\$22,242	\$13,045	\$16,366	\$18,894	\$21,854	\$25,169	\$28,576	\$36,008
West	862	\$26,058	\$15,066	\$18,443	\$21,338	\$25,195	\$29,403	\$35,095	\$45,721
Unknown	3	\$23,723	\$19,862	\$19,862	\$19,862	\$20,424	\$30,883	\$30,883	\$30,883
Census Division									
New England	451	\$27,036	\$13,553	\$19,460	\$22,327	\$27,038	\$30,993	\$34,699	\$42,643
Middle Atlantic	849	\$27,616	\$15,542	\$19,794	\$23,240	\$27,302	\$31,602	\$35,973	\$44,132
East North Central	860	\$22,685	\$12,970	\$16,397	\$18,765	\$22,030	\$25,962	\$29,368	\$37,578
West North Central	457	\$22,979	\$13,227	\$15,713	\$17,726	\$21,577	\$27,277	\$33,416	\$40,508
South Atlantic	1,108	\$21,646	\$12,826	\$15,624	\$18,289	\$21,356	\$24,474	\$28,169	\$34,296
Each South Central	373	\$22,490	\$12,747	\$16,907	\$18,970	\$21,772	\$25,417	\$29,246	\$37,351
West South Central	575	\$23,227	\$14,337	\$17,306	\$19,989	\$22,877	\$26,143	\$28,768	\$36,703
Mountain	277	\$23,649	\$14,689	\$17,752	\$19,968	\$22,645	\$25,920	\$30,924	\$39,907
Pacific	585	\$27,198	\$15,066	\$18,753	\$22,662	\$26,570	\$30,734	\$35,848	\$47,060
Unknown	3	\$23,723	\$19,862	\$19,862	\$19,862	\$20,424	\$30,883	\$30,883	\$30,883
Provider Risk Score Decile									
1st	2	\$22,144	\$20,215	\$20,215	\$20,215	\$22,144	\$24,073	\$24,073	\$24,073
2nd	275	\$21,908	\$11,239	\$15,580	\$17,854	\$20,632	\$25,474	\$29,246	\$36,419
3rd	798	\$22,312	\$12,157	\$15,660	\$17,872	\$21,569	\$25,689	\$30,092	\$39,975
4th	1,027	\$22,931	\$13,458	\$16,165	\$18,490	\$21,914	\$26,308	\$31,226	\$41,131
5th	1,057	\$24,291	\$13,286	\$17,315	\$19,843	\$23,590	\$27,518	\$32,355	\$42,643
6th	856	\$25,122	\$14,076	\$17,707	\$20,623	\$24,030	\$28,755	\$33,914	\$43,886
7th	564	\$25,828	\$14,766	\$18,834	\$21,523	\$25,172	\$29,427	\$34,270	\$44,059
8th	448	\$25,464	\$15,829	\$19,256	\$21,448	\$25,092	\$28,484	\$32,074	\$40,318
9th	367	\$25,661	\$15,887	\$19,427	\$21,596	\$25,097	\$28,908	\$33,186	\$39,798
10th	144	\$27,196	\$17,992	\$21,362	\$23,520	\$26,834	\$30,062	\$35,095	\$38,112
Number of Episodes									
10-19 Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
20-39 Episodes	3,026	\$24,465	\$13,141	\$16,533	\$19,420	\$23,466	\$28,507	\$33,914	\$43,541
30-59 Episodes	1,264	\$23,766	\$13,443	\$17,128	\$19,484	\$23,037	\$27,147	\$31,521	\$40,123
60-79 Episodes	552	\$23,678	\$13,887	\$17,605	\$19,987	\$23,227	\$26,647	\$30,540	\$37,473
80-99 Episodes	277	\$23,916	\$13,764	\$17,989	\$20,888	\$23,697	\$26,877	\$29,761	\$36,972
100-199 Episodes	355	\$24,012	\$15,027	\$19,143	\$21,286	\$23,803	\$26,566	\$28,859	\$35,467
200-299 Episodes	49	\$24,500	\$15,807	\$19,320	\$21,557	\$24,424	\$27,168	\$30,341	\$34,989
300+ Episodes	15	\$28,070	\$20,387	\$23,310	\$26,806	\$27,215	\$29,923	\$33,277	\$34,789

Table 16-A. Renal or Ureteral Stone Surgical Treatment, TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	1,661	\$6,192	\$4,836	\$5,422	\$5,730	\$6,082	\$6,545	\$7,123	\$8,519
Sub-group									
Extracorporeal Shock Wave Lithotripsy	1,535	\$5,654	\$3,959	\$4,760	\$5,102	\$5,489	\$6,028	\$6,731	\$8,810
Percutaneous Nephrostolithotomy	709	\$11,023	\$2,415	\$8,453	\$9,733	\$10,769	\$12,226	\$14,249	\$19,325
Ureteroscopy	1,630	\$6,350	\$4,485	\$5,332	\$5,743	\$6,215	\$6,786	\$7,535	\$9,677
Urban/Rural									
Urban	1,294	\$6,148	\$4,836	\$5,418	\$5,710	\$6,050	\$6,465	\$7,010	\$8,620
Rural	366	\$6,352	\$4,742	\$5,476	\$5,802	\$6,268	\$6,806	\$7,452	\$8,485
Unknown	1	\$4,997	\$4,997	\$4,997	\$4,997	\$4,997	\$4,997	\$4,997	\$4,997
Census Region									
Northeast	294	\$6,289	\$4,762	\$5,479	\$5,808	\$6,186	\$6,625	\$7,282	\$8,759
Midwest	354	\$6,323	\$5,019	\$5,562	\$5,818	\$6,178	\$6,687	\$7,281	\$8,443
South	677	\$6,139	\$4,856	\$5,368	\$5,693	\$6,039	\$6,469	\$6,983	\$8,463
West	334	\$6,080	\$4,763	\$5,342	\$5,650	\$5,994	\$6,380	\$6,892	\$8,620
Unknown	2	\$5,507	\$4,997	\$4,997	\$4,997	\$5,507	\$6,017	\$6,017	\$6,017
Census Division									

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
New England	105	\$6,289	\$4,836	\$5,480	\$5,808	\$6,138	\$6,728	\$7,416	\$8,432
Middle Atlantic	189	\$6,289	\$4,762	\$5,460	\$5,815	\$6,190	\$6,589	\$7,196	\$9,767
East North Central	241	\$6,261	\$5,166	\$5,538	\$5,752	\$6,167	\$6,619	\$7,065	\$8,169
West North Central	113	\$6,454	\$5,019	\$5,712	\$5,916	\$6,265	\$6,939	\$7,545	\$8,519
South Atlantic	332	\$6,231	\$4,982	\$5,400	\$5,786	\$6,108	\$6,513	\$7,186	\$8,915
Each South Central	140	\$5,994	\$4,742	\$5,419	\$5,633	\$5,906	\$6,234	\$6,730	\$8,047
West South Central	205	\$6,091	\$4,982	\$5,239	\$5,617	\$6,036	\$6,504	\$6,953	\$7,684
Mountain	119	\$6,163	\$4,879	\$5,476	\$5,726	\$6,080	\$6,513	\$7,132	\$7,753
Pacific	215	\$6,035	\$4,745	\$5,254	\$5,594	\$5,949	\$6,335	\$6,734	\$9,489
Unknown	2	\$5,507	\$4,997	\$4,997	\$4,997	\$5,507	\$6,017	\$6,017	\$6,017
Provider Risk Score Decile									
1st	85	\$5,972	\$1,848	\$5,065	\$5,330	\$5,858	\$6,615	\$7,246	\$9,767
2nd	102	\$6,026	\$4,836	\$5,132	\$5,457	\$5,901	\$6,512	\$7,055	\$7,801
3rd	134	\$6,140	\$3,943	\$5,334	\$5,681	\$6,030	\$6,332	\$7,207	\$9,874
4th	174	\$6,132	\$4,856	\$5,249	\$5,688	\$6,061	\$6,489	\$7,069	\$8,383
5th	200	\$6,160	\$4,928	\$5,478	\$5,711	\$6,053	\$6,488	\$7,058	\$8,508
6th	215	\$6,210	\$5,084	\$5,444	\$5,720	\$6,050	\$6,485	\$7,119	\$9,347
7th	220	\$6,285	\$5,365	\$5,687	\$5,878	\$6,182	\$6,640	\$7,055	\$7,730
8th	215	\$6,268	\$4,879	\$5,505	\$5,762	\$6,156	\$6,587	\$7,188	\$8,432
9th	198	\$6,290	\$4,982	\$5,517	\$5,820	\$6,186	\$6,700	\$7,255	\$7,963
10th	118	\$6,190	\$4,570	\$5,517	\$5,728	\$6,106	\$6,542	\$7,065	\$8,463
Number of Episodes									
10-19 Episodes	497	\$6,177	\$4,492	\$5,177	\$5,542	\$6,069	\$6,660	\$7,246	\$9,718
20-39 Episodes	436	\$6,214	\$4,856	\$5,391	\$5,724	\$6,107	\$6,575	\$7,243	\$8,620
30-59 Episodes	246	\$6,237	\$5,113	\$5,475	\$5,735	\$6,082	\$6,638	\$7,240	\$9,211
60-79 Episodes	136	\$6,219	\$5,150	\$5,637	\$5,819	\$6,162	\$6,540	\$6,892	\$8,033
80-99 Episodes	102	\$6,150	\$5,078	\$5,514	\$5,815	\$6,086	\$6,395	\$6,649	\$8,352
100-199 Episodes	176	\$6,145	\$5,365	\$5,665	\$5,862	\$6,022	\$6,351	\$6,663	\$8,311
200-299 Episodes	32	\$6,122	\$5,459	\$5,648	\$5,839	\$6,029	\$6,261	\$6,642	\$7,621
300+ Episodes	36	\$6,150	\$5,393	\$5,692	\$5,818	\$6,147	\$6,435	\$6,750	\$7,123

Table 16-B. Renal or Ureteral Stone Surgical Treatment, TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	4,158	\$6,170	\$4,697	\$5,272	\$5,635	\$6,074	\$6,595	\$7,166	\$8,727
Sub-group									
Extracorporeal Shock Wave Lithotripsy	3,631	\$5,605	\$3,748	\$4,580	\$4,931	\$5,399	\$6,050	\$6,860	\$9,424
Percutaneous Nephrostolithotomy	1,187	\$11,062	\$2,028	\$8,279	\$9,693	\$10,755	\$12,362	\$14,555	\$21,922
Ureteroscopy	4,031	\$6,309	\$4,231	\$5,162	\$5,592	\$6,158	\$6,852	\$7,614	\$9,722
Urban/Rural									
Urban	3,581	\$6,143	\$4,673	\$5,263	\$5,616	\$6,042	\$6,558	\$7,115	\$8,727
Rural	576	\$6,341	\$4,765	\$5,367	\$5,777	\$6,271	\$6,847	\$7,415	\$8,779
Unknown	1	\$5,305	\$5,305	\$5,305	\$5,305	\$5,305	\$5,305	\$5,305	\$5,305
Census Region									
Northeast	742	\$6,316	\$4,705	\$5,311	\$5,733	\$6,185	\$6,814	\$7,485	\$8,904
Midwest	995	\$6,244	\$4,656	\$5,352	\$5,703	\$6,155	\$6,689	\$7,253	\$8,618
South	1,759	\$6,109	\$4,712	\$5,241	\$5,603	\$6,006	\$6,503	\$7,026	\$8,745
West	650	\$6,058	\$4,577	\$5,198	\$5,566	\$5,997	\$6,454	\$6,988	\$8,136
Unknown	12	\$5,985	\$5,231	\$5,285	\$5,369	\$6,111	\$6,431	\$6,721	\$6,769
Census Division									
New England	254	\$6,289	\$4,877	\$5,398	\$5,719	\$6,138	\$6,786	\$7,527	\$8,600
Middle Atlantic	488	\$6,331	\$4,529	\$5,268	\$5,738	\$6,228	\$6,832	\$7,484	\$8,961
East North Central	693	\$6,222	\$4,656	\$5,352	\$5,678	\$6,138	\$6,662	\$7,198	\$8,355
West North Central	302	\$6,294	\$4,757	\$5,336	\$5,765	\$6,239	\$6,742	\$7,321	\$8,631
South Atlantic	971	\$6,200	\$4,698	\$5,300	\$5,649	\$6,104	\$6,611	\$7,159	\$9,251

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
Each South Central	354	\$5,940	\$4,650	\$5,211	\$5,533	\$5,906	\$6,275	\$6,752	\$7,743
West South Central	434	\$6,042	\$4,873	\$5,176	\$5,590	\$5,959	\$6,473	\$6,940	\$8,139
Mountain	281	\$6,113	\$4,587	\$5,249	\$5,610	\$6,046	\$6,515	\$7,144	\$7,976
Pacific	369	\$6,017	\$4,573	\$5,174	\$5,514	\$5,935	\$6,371	\$6,923	\$9,044
Unknown	12	\$5,985	\$5,231	\$5,285	\$5,369	\$6,111	\$6,431	\$6,721	\$6,769
Provider Risk Score Decile									
1st	311	\$5,973	\$4,468	\$5,017	\$5,315	\$5,859	\$6,498	\$7,224	\$8,241
2nd	221	\$5,988	\$4,103	\$5,107	\$5,437	\$5,852	\$6,497	\$6,993	\$8,904
3rd	328	\$6,075	\$4,296	\$5,143	\$5,438	\$5,943	\$6,464	\$7,110	\$9,005
4th	381	\$6,156	\$4,499	\$5,229	\$5,546	\$6,011	\$6,636	\$7,244	\$9,251
5th	492	\$6,130	\$4,706	\$5,275	\$5,679	\$6,058	\$6,519	\$7,000	\$8,203
6th	571	\$6,175	\$4,804	\$5,334	\$5,664	\$6,065	\$6,583	\$7,111	\$9,120
7th	562	\$6,218	\$4,712	\$5,386	\$5,724	\$6,150	\$6,626	\$7,173	\$8,298
8th	548	\$6,239	\$4,887	\$5,363	\$5,740	\$6,138	\$6,644	\$7,224	\$8,783
9th	493	\$6,273	\$4,960	\$5,389	\$5,754	\$6,161	\$6,671	\$7,283	\$8,600
10th	251	\$6,325	\$4,936	\$5,490	\$5,790	\$6,176	\$6,743	\$7,338	\$8,828
Number of Episodes									
10-19 Episodes	2,482	\$6,134	\$4,573	\$5,212	\$5,545	\$6,023	\$6,585	\$7,193	\$8,783
20-39 Episodes	1,408	\$6,218	\$4,862	\$5,400	\$5,749	\$6,122	\$6,597	\$7,115	\$8,525
30-59 Episodes	221	\$6,277	\$5,165	\$5,478	\$5,753	\$6,151	\$6,642	\$7,245	\$8,565
60-79 Episodes	38	\$6,156	\$5,067	\$5,178	\$5,761	\$6,127	\$6,514	\$7,253	\$7,487
80-99 Episodes	4	\$6,035	\$5,433	\$5,433	\$5,621	\$6,102	\$6,449	\$6,503	\$6,503
100-199 Episodes	4	\$6,154	\$5,463	\$5,463	\$5,667	\$6,046	\$6,641	\$7,059	\$7,059
200-299 Episodes	1	\$5,581	\$5,581	\$5,581	\$5,581	\$5,581	\$5,581	\$5,581	\$5,581
300+ Episodes	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Table 17-A. Revised Medicare Spending Per Beneficiary (MSPB) clinician, TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	20,853	\$18,838	\$14,942	\$16,798	\$17,730	\$18,701	\$19,791	\$20,982	\$23,939
Urban/Rural									
Urban	18,099	\$18,908	\$15,037	\$16,886	\$17,814	\$18,763	\$19,853	\$21,028	\$24,011
Rural	2,737	\$18,376	\$14,564	\$16,318	\$17,251	\$18,259	\$19,362	\$20,543	\$23,443
Unknown	17	\$18,610	\$15,316	\$16,443	\$17,064	\$18,496	\$19,527	\$21,807	\$21,984
Census Region									
Northeast	3,747	\$19,234	\$15,338	\$17,252	\$18,155	\$19,138	\$20,201	\$21,352	\$23,850
Midwest	4,123	\$18,591	\$15,132	\$16,771	\$17,615	\$18,499	\$19,462	\$20,489	\$23,164
South	8,930	\$18,795	\$14,858	\$16,746	\$17,719	\$18,692	\$19,730	\$20,907	\$23,789
West	4,034	\$18,818	\$14,811	\$16,660	\$17,542	\$18,541	\$19,837	\$21,252	\$25,099
Unknown	19	\$18,688	\$15,316	\$16,443	\$17,064	\$18,878	\$19,614	\$21,807	\$21,984
Census Division									
New England	669	\$19,021	\$15,355	\$17,361	\$18,135	\$18,913	\$19,801	\$20,683	\$23,508
Middle Atlantic	3,078	\$19,281	\$15,320	\$17,232	\$18,159	\$19,201	\$20,275	\$21,476	\$23,868
East North Central	3,237	\$18,754	\$15,165	\$16,881	\$17,768	\$18,661	\$19,625	\$20,699	\$23,306
West North Central	886	\$17,992	\$14,921	\$16,439	\$17,189	\$17,995	\$18,794	\$19,523	\$21,432
South Atlantic	4,533	\$18,666	\$14,792	\$16,705	\$17,634	\$18,596	\$19,595	\$20,743	\$23,141
East South Central	1,592	\$18,500	\$14,824	\$16,525	\$17,565	\$18,465	\$19,442	\$20,279	\$22,741
West South Central	2,805	\$19,169	\$14,908	\$16,964	\$17,989	\$18,999	\$20,133	\$21,518	\$25,195
Mountain	1,100	\$18,478	\$14,628	\$16,611	\$17,421	\$18,343	\$19,465	\$20,569	\$23,399
Pacific	2,934	\$18,945	\$14,842	\$16,684	\$17,597	\$18,648	\$19,983	\$21,534	\$25,475
Unknown	19	\$18,688	\$15,316	\$16,443	\$17,064	\$18,878	\$19,614	\$21,807	\$21,984
Provider risk score decile									
1st	196	\$17,765	\$12,854	\$14,813	\$16,005	\$17,538	\$19,240	\$20,616	\$29,187
2nd	1,446	\$18,184	\$14,170	\$15,793	\$16,843	\$18,034	\$19,314	\$20,832	\$23,707
3rd	2,289	\$18,594	\$14,593	\$16,328	\$17,364	\$18,500	\$19,669	\$20,895	\$23,726
4th	2,757	\$18,748	\$14,720	\$16,652	\$17,566	\$18,615	\$19,739	\$21,025	\$24,104
5th	3,000	\$18,954	\$15,026	\$16,833	\$17,769	\$18,779	\$19,898	\$21,232	\$25,051

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
6th	2,921	\$18,914	\$15,319	\$16,952	\$17,751	\$18,719	\$19,830	\$21,030	\$24,261
7th	2,618	\$18,802	\$15,440	\$17,084	\$17,865	\$18,663	\$19,551	\$20,623	\$23,564
8th	2,299	\$18,859	\$15,816	\$17,135	\$17,897	\$18,648	\$19,653	\$20,689	\$23,844
9th	1,938	\$19,362	\$16,068	\$17,447	\$18,223	\$19,193	\$20,286	\$21,458	\$24,271
10th	1,389	\$19,138	\$16,182	\$17,429	\$18,227	\$19,060	\$19,962	\$20,917	\$22,957
Number of episodes									
35-49 Episodes	3,933	\$18,915	\$14,226	\$16,206	\$17,396	\$18,714	\$20,248	\$21,801	\$25,228
50-64 Episodes	2,645	\$18,871	\$14,669	\$16,437	\$17,526	\$18,761	\$20,117	\$21,378	\$24,329
65-79 Episodes	1,980	\$18,805	\$14,835	\$16,505	\$17,540	\$18,668	\$19,985	\$21,055	\$24,271
80-99 Episodes	1,874	\$18,959	\$14,982	\$16,780	\$17,760	\$18,884	\$19,972	\$21,295	\$24,107
100-199 Episodes	4,492	\$18,925	\$15,389	\$16,971	\$17,834	\$18,814	\$19,853	\$20,927	\$23,748
200-299 Episodes	1,746	\$18,869	\$15,784	\$17,185	\$17,904	\$18,744	\$19,658	\$20,608	\$22,980
300+ Episodes	4,183	\$18,598	\$16,045	\$17,289	\$17,899	\$18,530	\$19,237	\$19,954	\$21,577

Table 17-B. Revised Medicare Spending Per Beneficiary (MSPB) clinician, TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	127,529	\$19,366	\$15,430	\$17,149	\$18,150	\$19,262	\$20,446	\$21,659	\$24,420
Urban/Rural									
Urban	113,010	\$19,431	\$15,539	\$17,230	\$18,221	\$19,324	\$20,504	\$21,708	\$24,469
Rural	14,455	\$18,857	\$14,922	\$16,614	\$17,643	\$18,765	\$19,937	\$21,200	\$23,884
Unknown	64	\$19,447	\$15,316	\$16,906	\$18,630	\$19,550	\$20,473	\$21,760	\$23,734
Census Region									
Northeast	26,124	\$19,860	\$15,904	\$17,653	\$18,646	\$19,748	\$20,931	\$22,174	\$25,001
Midwest	31,419	\$19,272	\$15,354	\$17,100	\$18,082	\$19,168	\$20,348	\$21,539	\$24,089
South	50,762	\$19,325	\$15,468	\$17,182	\$18,150	\$19,230	\$20,374	\$21,538	\$24,237
West	19,153	\$18,952	\$15,171	\$16,726	\$17,695	\$18,808	\$20,037	\$21,308	\$24,366
Unknown	71	\$19,426	\$15,316	\$17,064	\$18,654	\$19,574	\$20,406	\$21,610	\$23,734
Census Division									
New England	7,970	\$19,778	\$16,149	\$17,798	\$18,705	\$19,660	\$20,728	\$21,895	\$24,624
Middle Atlantic	18,154	\$19,895	\$15,842	\$17,574	\$18,616	\$19,788	\$21,026	\$22,312	\$25,191
East North Central	22,068	\$19,415	\$15,499	\$17,265	\$18,242	\$19,317	\$20,477	\$21,639	\$24,219
West North Central	9,351	\$18,933	\$15,080	\$16,770	\$17,704	\$18,813	\$19,990	\$21,218	\$23,906
South Atlantic	28,285	\$19,223	\$15,395	\$17,114	\$18,062	\$19,133	\$20,277	\$21,423	\$23,856
East South Central	9,278	\$19,311	\$15,580	\$17,228	\$18,205	\$19,232	\$20,309	\$21,409	\$24,085
West South Central	13,199	\$19,555	\$15,541	\$17,305	\$18,306	\$19,443	\$20,650	\$21,851	\$24,795
Mountain	6,670	\$18,973	\$15,198	\$16,757	\$17,737	\$18,844	\$20,060	\$21,282	\$23,998
Pacific	12,483	\$18,941	\$15,132	\$16,704	\$17,673	\$18,782	\$20,029	\$21,317	\$24,526
Unknown	71	\$19,426	\$15,316	\$17,064	\$18,654	\$19,574	\$20,406	\$21,610	\$23,734
Provider risk score decile									
1st	1,403	\$18,030	\$13,273	\$15,321	\$16,480	\$17,738	\$19,442	\$20,966	\$25,025
2nd	9,679	\$18,827	\$14,649	\$16,458	\$17,551	\$18,742	\$19,987	\$21,245	\$23,920
3rd	17,316	\$19,114	\$15,324	\$17,041	\$17,991	\$19,049	\$20,150	\$21,266	\$23,634
4th	20,461	\$19,218	\$15,567	\$17,194	\$18,143	\$19,150	\$20,210	\$21,285	\$23,595
5th	19,171	\$19,384	\$15,687	\$17,338	\$18,271	\$19,305	\$20,404	\$21,481	\$24,042
6th	15,534	\$19,598	\$15,899	\$17,459	\$18,447	\$19,487	\$20,622	\$21,800	\$24,407
7th	13,757	\$19,497	\$15,403	\$17,024	\$18,162	\$19,398	\$20,680	\$21,952	\$25,220
8th	13,156	\$19,528	\$15,639	\$17,090	\$18,121	\$19,338	\$20,728	\$22,082	\$25,335
9th	10,152	\$19,949	\$16,124	\$17,643	\$18,595	\$19,806	\$21,106	\$22,406	\$25,293
10th	6,900	\$19,459	\$16,088	\$17,478	\$18,218	\$19,225	\$20,458	\$21,756	\$24,598
Number of episodes									
35-49 Episodes	32,709	\$19,409	\$14,999	\$16,831	\$17,932	\$19,229	\$20,690	\$22,178	\$25,348
50-64 Episodes	21,897	\$19,387	\$15,304	\$17,054	\$18,051	\$19,261	\$20,569	\$21,853	\$24,752
65-79 Episodes	15,404	\$19,376	\$15,484	\$17,105	\$18,124	\$19,259	\$20,504	\$21,759	\$24,253
80-99 Episodes	14,360	\$19,389	\$15,682	\$17,264	\$18,225	\$19,300	\$20,455	\$21,605	\$23,876
100-199 Episodes	31,207	\$19,311	\$15,850	\$17,353	\$18,265	\$19,265	\$20,300	\$21,316	\$23,310
200-299 Episodes	9,095	\$19,311	\$16,116	\$17,687	\$18,433	\$19,285	\$20,165	\$20,985	\$22,540

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
300+ Episodes	2,857	\$19,289	\$16,223	\$17,705	\$18,438	\$19,254	\$20,066	\$20,843	\$22,779

Table 18-A. Revised Total Per Capita Cost (TPCC), TIN Level Cost Measure Scores

Provider Characteristic	# of TINs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TINs	77,479	\$1,053	\$505	\$791	\$921	\$1,040	\$1,161	\$1,309	\$1,821
Urban/Rural									
Urban	65,139	\$1,054	\$529	\$793	\$922	\$1,040	\$1,161	\$1,311	\$1,821
Rural	11,555	\$1,070	\$588	\$829	\$941	\$1,052	\$1,171	\$1,311	\$1,828
Unknown	785	\$669	\$137	\$327	\$476	\$647	\$836	\$1,036	\$1,508
Census Region									
Northeast	16,144	\$1,012	\$575	\$788	\$899	\$1,005	\$1,110	\$1,231	\$1,610
Midwest	12,602	\$1,090	\$602	\$847	\$960	\$1,070	\$1,190	\$1,339	\$1,880
South	30,543	\$1,084	\$617	\$847	\$955	\$1,062	\$1,177	\$1,328	\$1,878
West	15,989	\$1,057	\$543	\$771	\$906	\$1,040	\$1,177	\$1,340	\$1,874
Unknown	2,201	\$666	\$193	\$419	\$527	\$640	\$779	\$943	\$1,374
Census Division									
New England	3,423	\$1,031	\$611	\$824	\$919	\$1,010	\$1,120	\$1,248	\$1,694
Middle Atlantic	12,721	\$1,007	\$568	\$779	\$893	\$1,002	\$1,108	\$1,227	\$1,578
East North Central	9,705	\$1,082	\$602	\$847	\$955	\$1,062	\$1,180	\$1,323	\$1,855
West North Central	2,897	\$1,119	\$579	\$851	\$981	\$1,094	\$1,224	\$1,383	\$1,997
South Atlantic	15,851	\$1,059	\$610	\$832	\$938	\$1,040	\$1,148	\$1,289	\$1,787
East South Central	5,194	\$1,066	\$595	\$847	\$946	\$1,044	\$1,148	\$1,281	\$1,821
West South Central	9,498	\$1,137	\$645	\$882	\$998	\$1,110	\$1,236	\$1,398	\$2,017
Mountain	4,736	\$1,122	\$597	\$860	\$978	\$1,096	\$1,224	\$1,382	\$1,948
Pacific	11,253	\$1,030	\$534	\$748	\$877	\$1,012	\$1,152	\$1,316	\$1,842
Unknown	2,201	\$666	\$193	\$419	\$527	\$640	\$779	\$943	\$1,374
Provider Risk Score Decile									
1st	5,587	\$1,067	\$495	\$796	\$934	\$1,057	\$1,189	\$1,332	\$1,773
2nd	7,935	\$1,055	\$549	\$818	\$946	\$1,052	\$1,158	\$1,278	\$1,685
3rd	8,270	\$1,042	\$509	\$803	\$937	\$1,045	\$1,145	\$1,260	\$1,673
4th	8,346	\$1,032	\$501	\$788	\$919	\$1,034	\$1,140	\$1,261	\$1,590
5th	8,363	\$1,026	\$503	\$776	\$907	\$1,026	\$1,135	\$1,252	\$1,626
6th	8,306	\$1,028	\$492	\$778	\$907	\$1,022	\$1,138	\$1,268	\$1,686
7th	8,261	\$1,036	\$500	\$780	\$906	\$1,025	\$1,147	\$1,279	\$1,749
8th	8,070	\$1,040	\$452	\$764	\$903	\$1,024	\$1,151	\$1,307	\$1,900
9th	7,741	\$1,086	\$500	\$799	\$925	\$1,049	\$1,200	\$1,404	\$2,029
10th	6,600	\$1,141	\$571	\$819	\$952	\$1,100	\$1,287	\$1,508	\$2,090
Number of Beneficiary Months									
20-199 Bene-months	3,593	\$993	\$210	\$492	\$687	\$927	\$1,209	\$1,533	\$2,508
200-499 Bene-months	10,096	\$1,030	\$430	\$647	\$807	\$991	\$1,206	\$1,429	\$2,090
500-999 Bene-months	11,383	\$1,043	\$527	\$749	\$876	\$1,015	\$1,180	\$1,357	\$1,822
1,000-1,999 Bene-months	15,369	\$1,051	\$604	\$805	\$913	\$1,032	\$1,162	\$1,302	\$1,714
2,000-2,999 Bene-months	9,677	\$1,055	\$653	\$843	\$933	\$1,038	\$1,151	\$1,275	\$1,665
3,000-4,999 Bene-months	10,919	\$1,065	\$680	\$871	\$956	\$1,051	\$1,151	\$1,263	\$1,670
5,000+ Bene-months	16,442	\$1,080	\$762	\$922	\$992	\$1,068	\$1,149	\$1,246	\$1,547

Table 18-B. Revised Total Per Capital Cost (TPCC), TIN-NPI Level Cost Measure Scores

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
All TIN-NPIs	326,649	\$1,110	\$520	\$811	\$950	\$1,086	\$1,232	\$1,412	\$2,056
Urban/Rural									
Urban	280,092	\$1,116	\$552	\$820	\$955	\$1,089	\$1,234	\$1,416	\$2,069
Rural	43,078	\$1,108	\$551	\$819	\$949	\$1,083	\$1,231	\$1,404	\$2,023

Provider Characteristic	# of TIN-NPIs	Mean Score	Score Percentile						
			1st	10th	25th	50th	75th	90th	99th
Unknown	3,479	\$702	\$162	\$354	\$501	\$672	\$859	\$1,076	\$1,616
Census Region									
Northeast	69,674	\$1,087	\$559	\$809	\$937	\$1,063	\$1,201	\$1,368	\$1,951
Midwest	73,766	\$1,141	\$577	\$842	\$974	\$1,109	\$1,263	\$1,450	\$2,134
South	120,939	\$1,122	\$577	\$839	\$967	\$1,095	\$1,233	\$1,410	\$2,060
West	57,176	\$1,110	\$522	\$796	\$938	\$1,083	\$1,239	\$1,431	\$2,095
Unknown	5,094	\$703	\$176	\$395	\$529	\$672	\$836	\$1,048	\$1,588
Census Division									
New England	21,425	\$1,100	\$570	\$818	\$943	\$1,069	\$1,219	\$1,398	\$2,006
Middle Atlantic	48,249	\$1,081	\$557	\$805	\$934	\$1,061	\$1,194	\$1,353	\$1,918
East North Central	51,980	\$1,134	\$581	\$842	\$972	\$1,103	\$1,252	\$1,434	\$2,100
West North Central	21,786	\$1,158	\$568	\$840	\$978	\$1,124	\$1,289	\$1,488	\$2,228
South Atlantic	66,344	\$1,105	\$567	\$833	\$957	\$1,081	\$1,212	\$1,378	\$2,005
East South Central	21,657	\$1,096	\$569	\$820	\$944	\$1,071	\$1,203	\$1,371	\$1,990
West South Central	32,938	\$1,173	\$600	\$870	\$1,008	\$1,143	\$1,293	\$1,486	\$2,174
Mountain	21,654	\$1,152	\$558	\$845	\$981	\$1,122	\$1,276	\$1,472	\$2,140
Pacific	35,522	\$1,085	\$505	\$772	\$914	\$1,060	\$1,214	\$1,401	\$2,065
Unknown	5,094	\$703	\$176	\$395	\$529	\$672	\$836	\$1,048	\$1,588
Provider Risk Score Decile									
1st	10,961	\$1,074	\$490	\$756	\$897	\$1,054	\$1,222	\$1,411	\$1,891
2nd	31,390	\$1,087	\$535	\$804	\$940	\$1,075	\$1,213	\$1,363	\$1,812
3rd	38,088	\$1,087	\$540	\$822	\$954	\$1,079	\$1,205	\$1,344	\$1,775
4th	40,026	\$1,086	\$537	\$823	\$954	\$1,076	\$1,201	\$1,339	\$1,808
5th	39,866	\$1,087	\$513	\$812	\$948	\$1,076	\$1,206	\$1,355	\$1,827
6th	39,064	\$1,094	\$513	\$810	\$948	\$1,079	\$1,215	\$1,375	\$1,901
7th	37,688	\$1,104	\$506	\$814	\$952	\$1,083	\$1,224	\$1,396	\$2,034
8th	35,117	\$1,120	\$495	\$804	\$950	\$1,090	\$1,247	\$1,449	\$2,122
9th	32,450	\$1,165	\$515	\$811	\$957	\$1,114	\$1,307	\$1,568	\$2,347
10th	21,999	\$1,233	\$544	\$826	\$984	\$1,167	\$1,397	\$1,690	\$2,715
Number of Beneficiary Months									
20-199 Bene-months	33,130	\$1,091	\$295	\$581	\$774	\$1,020	\$1,315	\$1,652	\$2,700
200-499 Bene-months	77,748	\$1,120	\$518	\$746	\$893	\$1,074	\$1,287	\$1,525	\$2,260
500-999 Bene-months	67,351	\$1,113	\$621	\$822	\$942	\$1,084	\$1,247	\$1,422	\$1,953
1,000-1,999 Bene-months	68,490	\$1,109	\$690	\$876	\$977	\$1,090	\$1,217	\$1,352	\$1,741
2,000-2,999 Bene-months	34,707	\$1,106	\$743	\$912	\$997	\$1,094	\$1,198	\$1,308	\$1,619
3,000-4,999 Bene-months	29,906	\$1,107	\$771	\$935	\$1,012	\$1,098	\$1,190	\$1,283	\$1,552
5,000+ Bene-months	15,317	\$1,110	\$803	\$955	\$1,026	\$1,102	\$1,183	\$1,267	\$1,511