Researchers' Guide to the Account Level Budgeter (ALB):

Fiscal Year 2009 Update

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Acknowledgement:
We would like to acknowledge help from the Decision Support Office. ALB is a dynamic report that changes over time. Researchers are encouraged to examine the contents of the ALB data they are using to see if there are any new changes.

Contents

Terms Glossary

AITC	Austin Information Technology Center *(VA national data center in Austin, Texas)*
ALB	Account Level Budgeter *(module in DSS production system)*
ALBCC	Account Level Budget Cost Centers
ALBHR	Account Level Budget Human Resources
BOC	Budget Object Codes
CC	Cost Center
DCM	Department Cost Manager
DSS	Decision Support System *(derived database built from VHA data sources)*
DSO	DSS Support Office
FMS	Financial Management System *(VA general ledger)*
FP	Federal Fiscal Period
FTEE	Full Time Employee Equivalent *(employee working 10 hours/week = 0.25 FTEE)*
FY	Federal Fiscal Year
HERC	Health Economic Resource Center *(Menlo Park, CA)*
IPD	Intermediate Product Department
PAID	Personnel and Accounting Integrated Data System *(VA payroll system)*
TSO	Time Share Options *(menu navigation system on IBM OS/390)*
VHA	Veterans Health Administration
VSSC	VHA Support Service Center *(VA intranet)*
VISN	Veterans Integrates Service Network *(21 VA service areas in the US)*

1. Overview

This guide provides information on how the Decision Support System (DSS) Account Level Budgeter (ALB) National Data Extract (NDE) is created, how to access the ALB, and describes variables in the ALB. Examples of how the ALB may be used in research are also discussed.

The ALB NDE is the financial reporting extract. It is run monthly and is cumulative year to-date. The ALB contains no encounter-level or patient-level costs. Researchers should use this guidebook along with the *DSS National Data Extract (NDE) Technical Guide* and the *DSS NDE Layout Specifications.*[1]

During FY 2000-2008, the ALBCC (Account Level Budget Cost Centers) and ALBHR (Account Level Budget Human Resources) were two separate extracts. As of FY 2009, these databases have been merged into a single extract, the ALB NDE. In the process, several new variables were added and several variables that had been removed in 2008 were re-instituted (see Table 2.1, Table 4.2).

DSS is the Managerial Cost Accounting system for the Veterans Health Administration (VHA). DSS is an enterprise-wide VHA system, whereby each Veterans Integrated Service Network (VISN) maintains its own data within the structure set forth by the National DSO office in Bedford, MA. These local data are then uploaded and processed by the DSS system at the Austin Information Technology Center (AITC). The ALB NDEs generated by the AITC are caret delimited files, which are converted to SAS files at Austin on a yearly basis. Although local DSS systems are audited, researchers accessing the ALB should understand that there is normal variation in the DSS data across sites. Researchers are encouraged to work with local DSS site offices before and during research studies to ensure the data are correctly used.

The ALB is large (over 2 million records in FY 2009) and reports information in categories that are not frequently used or well understood by most researchers (i.e., ALBCC, Production Unit, Cost Center, Budget Object Code, Department Cost Manager (DCM) Department). To create the ALB, DSS uses data from many sources: the Financial Management System (FMS), VA payroll system (PAID), equipment and building depreciation, and VISN, headquarters, and national program support costs. DSS uses labor hours from PAID, however dollar costs are taken from FMS. ALB NDE costs may not agree with the extract parameters. Extracts define inputs to DSS; ALB represents outputs from DSS and are the product of DSS mapping at the facility level.[2]

Researchers using micro-cost methods may find the data in the ALB particularly useful. Researchers at HERC have used the ALB to estimate labor costs and the cost of overhead (also known as facility indirect costs).

[1] Currently available at http://vaww.dss.med.va.gov/nationalrptg/nr_extracts.asp
[2] *DSS National Data Extract (NDE) Technical Guide, p.13.*

2. ALB Variables

Table 2.1 lists the variables name, label, format type, and the fiscal year in which they appear (denoted by X) in the ALB extract.

Prior to 2009, the ALB extract consisted of two files – the HR and CC (Cost Center), which are denoted by separate columns. For a complete list of files available for each year, see Table 4.2. Underlined variables are hyperlinked to the corresponding variable notes below.

Table 2.1: Variables in the ALB Extract

SAS Variable Name	2009 *DSS NDE Technical Guide* Field[3]	Variable Label	Type	FY03 - FY07		FY08		FY09
				HR	CC	HR	CC	
ACTIVE	STATUS	Active-Inactive	Char		X		X	X
ACTDESC	ACTDESC	Account Code Description	Char					X*
ACT_DLLR	ACTDOL	Actual Cost	Num		X		X	X
ACT_HOUR	ACTHRS	Actual Hours	Num		X		X	X
ALBACCT	ACCOUNT	Account Code	Char	X	X	X	X	X
ALBCC	CENTER	Cost Center	Char	X	X	X	X	X
BOC	BOC	Budget Object Code	Char	X	X			X
BUD_DLLR		Budget $	Num		X		X	
BUD_HOUR		Budget Hours	Num		X		X	
CATNUM	CATNUM	Category Number	Char					X*
CC	CC	VA Cost Center	Char	X	X			X
CENDESC	CENDESC	Cost Center Description	Char					X*
COSTTYP	COSTTYP	Cost Type	Char					X*
DCM_DEPT	IPDNUM	IPD Number	Char		X		X	X
EDI	EDI	Account Type	Char		X		X	X
EXEMPT	EXEMPT	Exempt Status	Char		X		X	X
FB_DLLR		Flex Budget $	Num		X			
FB_HOUR		Flex Budget Hours	Num		X			
FILLER			Char	X**	X**			
FP	FP	Fiscal Period	Num	X	X	X	X	X
FV_DLLR		Flex Variance $	Num		X			
FV_HOUR		Flex Var. Hours	Num		X			

[3] Field name, as it appears in the table on p. 15 of the *DSS NDE Technical Guide*

SAS Variable Name	2009 *DSS NDE Technical Guide* Field[3]	Variable Label	Type	FY03 - FY07		FY08		FY09
				HR	CC	HR	CC	
FY	FY	Fiscal Year	Num	X	X	X	X	X
IPDDESC	IPDDESC	IPD Number Description	Char					X*
OT_DLLR	OTDOL	Actual OT Cost	Num					X*
OT_HR	OTHRS	Actual OT Hours	Num					X*
OV_DLLR		Overtime cost	Num	X		X		
OV_HRS		Overtime hours	Num	X		X		
PRODUNIT	PUNIT	DSS Production Unit	Char	X	X		X	X
REG_DLLR	REGDOL	Actual Regular Cost	Num					X*
REG_HOUR	REGHRS	Actual Regular Hours	Num					X*
STA3N	STA	Company Code	Num	X	X	X	X	X
STA6A	DIV	Division	Char	X	X	X	X	X
VAR_DLLR		Variance $	Num		X		X	
VAR_HOUR		Variance Hours	Num		X		X	
VISN	VISN	VISN	Num	X	X	X	X	X
VISN_PLC		VISN Product Line	Char		X		X	
VSH_DLLR	VSHDOL	Actual Vacation, Sick, Holiday Cost	Num	X		X		X
VSH_HOUR	VSHHRS	Actual Vacation, Sick, Holiday Hours	Num					X*
VSH_HRS		Actual Vacation, Sick, Holiday Hours	Num	X		X		
WORK_DLLR		Worked Cost	Num	X		X		
WORK_HRS		Worked Hours	Num	X		X		

* new in FY09.

** appears in FY04 only.

2.2 SAS Formats

HERC has developed a catalog of SAS formats for the ALB dataset, based on a list of ALBCC descriptions provided by the DSO. Not all ALBCC's used in the ALB extract have a description in this list, as the ALB extract frequently uses codes with additional digits or letters.

This format file has been stored as a SAS file at Austin Information Technology Center (AITC)[4] and can be found at:

`RMTPRD.HERC.DSS.SAS.ALBFMTS`

This file includes the following formats:

SAS Variable Name:	HERC Format Name:	Description:
ALBCC	$ALB01_. $ALB02_.	The most specific national definition. A broader, cost center level definition; will be the same for multiple ALBCC's.
BOC	$BOCNM.	BOC text description.
CC	$CCNM.	CC text description.
DCM_DEPT	$DCM01_. $DCM02_.	The most specific national definition. A broader, cost center level definition; will be the same for multiple DCM_DEPT's.
PRODUNIT	$PUNM.	PRODUNIT text description.

For example, for ALBCC=201121, the $ALB01_. definition text is "Non-Invasive Cardiology Unit" and the $ALB02_. text is "Medicine". For CC=201, the $CCNM. text is "Medical Service". For PRODUNIT="12", the $PUNM. text is "Non-Invasive Cardiology Unit (EKG + or Holter and/or + or - ECHO)". For a discussion of how these codes relate to one another, refer to the ALBCC variable notes below.

The HERC format file for the IPD data extract contains a format nearly identical to $DCM01_. called $IPD_. This format can also be used with the DCM_DEPT variable, and can be found in: `RMTPRD.HERC.DSS.SAS.IPDFMTS.`

An AITC functional task code is required to obtain access to the format files, which is available to all interested researchers. For more information about our work with SAS formats and the required task code, please contact us at herc@va.gov. Information on gaining access to the AITC is provided in Appendix A.

[4] Formerly known as Austin Automation Center (AAC).

Using the ALBCC SAS Format File

In order to format the values of ALBCC variables, the analyst must indicate the name of the format file in a Job Control Language (JCL) statement, and identify the file and formats names in SAS. The JCL includes a DD name statement that identifies the HERC format file. This statement includes the disposition share.

```
//LIBRARY DD DSN=RMTPRD.HERC.DSS.SAS.ALBFMTS, DISP=SHR
```

The SAS code should include an OPTIONS statement that tells SAS to search for formats in this file. Note that the name "LIBRARY" is not required; any name will do as long as the same name is used in both the JCL and the SAS OPTIONS statement.

```
OPTIONS FMTSEARCH = (LIBRARY);
```

The SAS code must also associate the formats in the HERC format library with the variables in DSS ALBCC file. The format statement can be used in a data step or in a procedure statement. Once it is applied, whenever the variable is to be printed, SAS will substitute the formatted value (the text from the format file) in place of the value of the variable. In the following example, the format is assigned in the data step. Subsequent step will not print the raw value of the variable ALBCC, they will print the formatted value based on "ALB01_. " format.

```
data test1;
set in1.albcc;
format albcc $alb01_.;
```

It is possible to use the formats to create a new variable, so that both the raw value and its formatted value may be used. In the following example, the "put" function allows the analyst to create a new variable that is assigned the formatted value for the variable ALBCC using the indicated format. In this example, the analyst will now be able to use the raw value of the ALBCC variable, or either one of the formats associate with that value, which have been given the names `ALB_STR1` and `ALB_STR2`.

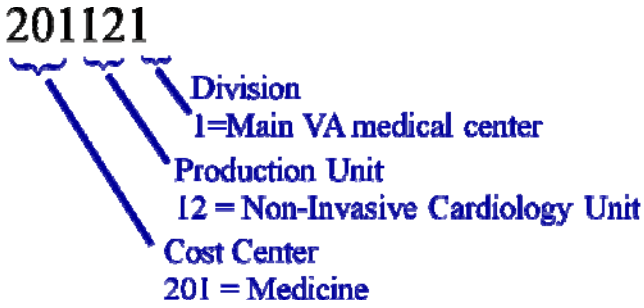
```
data test2;
set in1.albcc;
alb_str1=put(albcc, $alb01_.);
alb_str2=put(albcc, $alb02_.);
```

3. Notes on Variables

The following section includes notes on key ALB variables that may be of interest to researchers. For additional information on ALB variables and their descriptions, please see the *DSS NDE Technical Guide.*[5] Variable labels and data type are based on the FY09 ALB extract.

ACTIVE: If this ALB Cost Center is inactive, then ACTIVE variable has an "I". Otherwise, it is considered active if null.

ALBCC: Each Account Level Budget Cost Center (ALBCC) value varies from 6 to 8 characters long and is comprised of three pieces of information. The first 3 characters represent the FMS cost center responsible for the service. A cost center is an administrative unit and does not distinguish the particular patient care activity. The next 2 digits indicate the production unit, or department. The last segment, starting with the 6th character, indicates division, community based outpatient clinics, or satellite clinics. For example:



Usually, there is a one-to-one mapping from an ALBCC to DCM Department, e.g. ALBCC "201121" becomes DCM_DEPT "M121". The first character in DCM ("M" for Medicine) represents FMS cost center ("201" for Medicine).

ALBCC variable is associated with a HERC formats $ALB01_. and $ALB02_. (see Section 2.2; for an example, see CENDESC variable notes below).

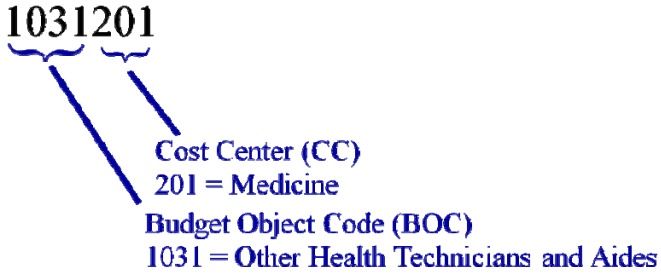
ALBCC numbers are assigned sequentially—there is no implicit order in the creation of the ALBCCs. The costs from FMS and PAID (i.e. labor, supply, and depreciated capital costs) are mapped to ALBCCs, thus ALBCC represents a function. Types of ALBCC's include direct department (provides products and services consumed by patients), indirect department (service made for other departments; these have a production unit code "00"), general support (produce products and services consumed by patients, but workload is not captured), and exempt (costs not allocated by DSS, e.g. non-VA care).

For each ALBCC, there is information on budgeted and actual expenses and hours of staff time. For physicians, activity is allocated by time spent in each production unit. For other staff, individual or group reports are used (at site's discretion). Researchers should be careful when reporting costs in the patient care department ALBCCs because the overhead costs are not included. By combining the ALBCC and BOC fields, researchers can identify personnel costs in a particular department (e.g., average nurse salary in long-term care; note, however, that nurse

[5] Currently available at http://vaww.dss.med.va.gov/nationalrptg/nr_extracts.asp

labor is tracked at the unit level in the VA). However, not all personnel are measured with the same level of accuracy. Discussions with your local DSS team can help provide greater clarity.

ALBACCT: This is a concatenation of the 4 digits of the Budget Object Code (BOC) and the 3 digits of the Cost Center (CC). For example:



While this variable does not have a SAS format, a format can be created because ALBACCT is a combination of the BOC and CC codes. The following is a SAS example to create a text variable based on the formatted values of these codes:

```
ALBACCT_DESC=PUT(SUBSTR(ALBACCT,1,4),bocnm.) || "+" ||
        PUT(SUBSTR(ALBACCT,5,3),ccnm.);
```

(where "bocnm." and "ccnm." are HERC formats as described in Section 2.2)

ACTDESC: This is a text description associated with a BOC value, e.g. "ADMINISTRATIVE PERSONNEL" is associated with BOC value of "1001".

ACT_DLLR: Actual dollar pay. This is the sum of regular employee pay (REG_DLLR), vacation, sick, and holiday pay (VSH_DLLR), and overtime pay (OT_DLLR).

ACT_HOUR: Actual hours that correspond to ACT_DLLR.

BOC: Budget Object Codes are used in both the VA FMS and PAID to track expenditures. These can be either a type of employee (e.g. 1061=Registered Nurse) or a type of expense (e.g. 2631=DRUGS, MEDICINES & CHEM SUPP). Researchers can use the BOCs to identify the cost of personnel, and to distinguish direct patient care from non-patient care services. This may be useful when researchers are estimating costs using micro-costing methods.

BOCs are constantly updated; see the Office of Financial Policy VA Financial Policy Volumes at http://www.va.gov/finance/policy/pubs/.

The BOC variable was not included in the FY 2008 ALB extract; however it is included in all other years. For FY08, this variable can be generated by taking the first four digits of the ALBACCT. Researchers can use the following SAS code:

```
BOC=SUBSTR(ALBACCT,1,4);
```

BUD_DLLR: Budgeted Dollars are the planned estimates of the amount of resources required. Within DSS, it is the plan of operation for the coming year expressed in quantitative terms. The budget offers a standard against which actual performance can subsequently be measured. Unless the DSS site team has a specific reason for over-writing budgeted values, usually budgeted values are based on prior-year actuals. This variable was dropped in FY09.

BUD_HOUR: Budget hours that correspond to BUD_DLLR. This variable was dropped in FY09.

CATNUM: Cost Type Category Number is a sub-classification of the cost type for Variable Labor (VL), as follows:

1 = Technician, social workers and related trainees
2 = Registered Nurse or Licensed Practical Nurse
4 = Physicians, dentists, psychologists, residents
5 = Contract labor (2500 labor BOCs)

This variable is used to group together employees with similar salary costs. For a full list, refer to the *DSS Account List*, currently at:
http://vaww.dss.med.va.gov/DSS%20Documents/processing%20and%20auditing/DSS%20ACCOUNT%20LIST%2010-14-09.xls

This file can be found in the "Other Processing Tools and Documents" section on the following page: http://vaww.dss.med.va.gov/programdocs/pd_ProAud.asp.

CENDESC: This is the description associated with an ALBCC value. Note that there is a one-to-one correspondence between an ALBCC and DCM_DEPT, thus CENDESC is usually identical to the corresponding IPDDESC. These descriptions are assigned at the station (STA3N) level, and thus there are variations in spelling and abbreviation, as well as location-specific suffixes.

The HERC format $ALB01_. (see Section 2.2) provides a national level description that is unique to a particular ALBCC value. For example, for ALBCC value "201121", the CENDESC value is "AC TG NONIV CARDIO INPT ECS" at station 402, and "AC WR MED CARDIO UNIT" at station 405 (these are identical to the corresponding IPDDESC values for respective stations). The HERC format $ALB01_. description for ALBCC value "201121" is "Non-Invasive Cardiology Unit" at all stations. However, not all ALBCC values have a HERC format string.

The HERC format $ALB02_. description for ALBCC value "201121" is "Medicine", which is a more general category that includes multiple ALBCC values across all stations. This format is useful when a higher-level grouping is desired.

CC: Cost Center is a three-digit numeric code used by FMS to characterize costs. Cost Centers seldom change; see Office of Financial Policy VA Policy Volumes at http://www.va.gov/finance/policy/pubs/.

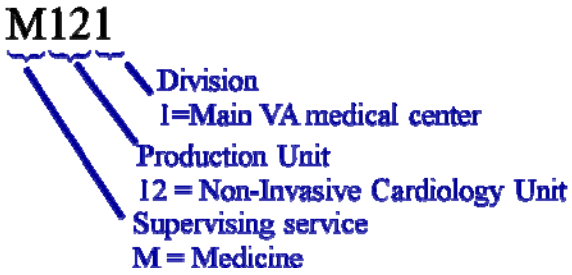
The CC variable was not included in the FY 2008 ALB extract; however it is included in all other years. For FY08, the CC field can be generated from the existing variables ALBCC or ALBACCT. Researchers can use the following SAS code to derive the field:

```
CC=SUBSTR(ALBACCT,5,3);
```

COSTTYP: Cost Type is the first level of cost classification in direct DCM departments. Valid VA cost types are:

VL = Variable Labor	FDL = Fixed Direct Labor
VS = Variable Supplies	FDE = Fixed Direct Equipment
FDO = Fixed Direct Other	FDF = Fixed Direct Facility

DCM_DEPT: Department Cost Manager Department is also called the Intermediate Product Department (IPD) Number. The 1st character indicates the clinical service (or primary product department). The 2nd and 3rd characters represent the production unit. The fourth to sixth characters detail the division or sub-departments of the VA medical center. For example:



Usually, there is a one-to-one mapping from an ALB Cost Center to DCM Department, e.g. ALBCC "201121" becomes DCM_DEPT "M121". The first character in DCM ("M" for Medicine) represents FMS Cost Center ("201" for Medicine).

The terms "Intermediate Product Department (IPD) Number" and "DCM Department" are used interchangeably. Within DSS, a department is a subset of a service – an organizational unit in which the manager has clearly defined areas of responsibility over which they exercise control. Departments may be created when there are identifiable products and costs, but not necessarily a labor pool. For more information on IPD data sets, see the HERC *Research Guide to the DSS Intermediate Product Department Files.*[6]

The HERC format file provides formats for this variable. The formats are named $DCM01_. and $DCM02_. (see Section 2.2). The HERC format $DCM01_. provides a national description for a DCM_DEPT value, while the IPDDESC is a local description assigned by a particular STA3N station. For example, the HERC $DCM01_. description might be "Primary Care Clinic", while the local description would be more specific, e.g., "Red Team PC Clinic."

[6] Yoon J, Gage M, Barnett P. *Research Guide to the DSS Intermediate Product Department Files.* Guidebook. Menlo Park, CA. VA Palo Alto, Health Economics Resource Center; 2009. at http://vaww.herc.research.va.gov/files/BOOK_471.pdf

Each clinical service is broken down into a unique set of product departments. There are codes for more than 600 distinct intermediate product departments. This list is updated annually, (currently located at: http://vaww.dss.med.va.gov/programdocs/pd_depts.asp), so the total number of departments can vary year to year.

EDI: This describes the product unit or DCM department as E (Exempt), D (Direct), or I (Indirect). Exempt costs are recorded in ALB but do not pass to DCM; these costs do not go to the intermediate products and therefore not passed on to the patient encounter. Generally, costs are exempt when there is no workload capture, for example, some non-VA care, contract work, or prosthetics.

EXEMPT: Has values "E", "N", or blank. This variable is not currently well defined. Items that are marked "E" in EDI, all have a blank value in EXEMPT (some "D" and "I" items also have a blank in EXEMPT). All items that have "E" in EXEMPT are marked "I" in EDI, however, there are very few such items. Of the items that have "N" in EXEMPT, about a third are "I", two thirds are "D", and some are blank in EDI.

The table below illustrates the frequency distribution:

```
The FREQ Procedure
Table of exempt by edi
exempt(EXEMPT STATUS)     edi(ACCOUNT TYPE)

Frequency|
Percent  |
Row Pct  |
Col Pct  |(blank) |D       |E       |I       |  Total
---------+--------+--------+--------+--------+
 (blank) |      0 |  29435 |  62062 |  13372 | 104869
         |   0.00 |   1.36 |   2.88 |   0.62 |   4.86
         |   0.00 |  28.07 |  59.18 |  12.75 |
         |   0.00 |   2.13 | 100.00 |   1.88 |
---------+--------+--------+--------+--------+
E        |      0 |      0 |      0 |     48 |     48
         |   0.00 |   0.00 |   0.00 |   0.00 |   0.00
         |   0.00 |   0.00 |   0.00 | 100.00 |
         |   0.00 |   0.00 |   0.00 |   0.01 |
---------+--------+--------+--------+--------+
N        |    587 |1354689 |      0 | 698052 |2053328
         |   0.03 |  62.77 |   0.00 |  32.34 |  95.14
         |   0.03 |  65.98 |   0.00 |  34.00 |
         | 100.00 |  97.87 |   0.00 |  98.11 |
---------+--------+--------+--------+--------+
Total         587  1384124    62062   711472  2158245
             0.03    64.13     2.88    32.97   100.00
```

FILLER: No definition. In the FY2004 extract, this field is blank and has been removed entirely from FY 2005 onward.

FP: Fiscal Period is the month of the fiscal year.

1=October	4=January	7=April	10=July
2=November	5=February	8=May	11=August
3=December	6=March	9=June	12=September

FY: Fiscal Year. The federal fiscal year runs from October 1st to September 30th and it is named for the year in which it ends.

IPDDESC: This is the local department description, associated to a DCM_DEPT value. Note that there is a one-to-one correspondence between DCM_DEPT and ALBCC, thus CENDESC is usually identical to the corresponding IPDDESC. These descriptions are assigned at the station (STA3N) level, and thus there are variations in spelling and abbreviation, as well as location-specific suffixes. The HERC format files (see Section 2.2) provide a national level description that is unique to a particular DCM_DEPT value, however, not all DCM_DEPT values have an associated description. For an example, refer to CENDESC variable above.

OT_DLLR: Overtime pay in FY 2009. This variable was called **OV_DLLR** in prior years, with the same definition.

OT_HOUR: Overtime hours in FY 2009. This variable was called **OV_HRS** in prior years, with the same definition.

PRODUNIT: Production Unit is a standardized two-digit alphanumeric code that identifies the location of care. Examples are surgery wards, primary care clinics, and respiratory therapy units, as well as indirect patient care services such as administration, research, and teaching. Production units are constantly updated, a current list is posted at http://vaww.dss.med.va.gov/programdocs/pd_depts.asp.

REG_DLLR: Regular pay in FY 2009. This variable was called **WORK_DLLR** in prior years, with the same definition.

REG_HOUR: Regular hours in FY 2009. This variable was called **WORK_HRS** in prior years, with the same definition.

STA3N: Station Number is a three-digit station identifier that indicates the VA hospital or the parent station of a branch to which the patient was serviced. Appendix C lists all the FY 2009 parent station codes.

STA6A: Six-digit station identifier includes information on the parent station as well as a modifier to indicate the division, for example, community based outpatient clinics or satellite clinics.

VAR_DLLR: Variance in Dollars is the difference between BUD_DLLR and ACT_DLLR, in use prior to FY 2009.

VAR_HOUR: Variance of Hours is the difference between BUD_HOUR and ACT_HOUR, in use prior to FY 2009.

VISN: A numeric code representing Veteran's Integrated Service Network. Appendix B shows all the values, in addition to a map displaying the VISNs' geographical location.

VISN_PLC: VISN Product Line; optional code specific to a VISN.

VSH_DLLR: Vacation, sick, holiday pay.

VSH_HRS: Vacation, sick, holiday hours. This variable was in use prior to FY2009, and was renamed to **VSH_HOUR** in FY2009.

WORK_DLLR: Regular pay prior to FY 2009. This variable is renamed REG_DLLR in FY 2009, with the same definition.

WORK_HOUR: Regular hours prior to FY 2009. This variable is renamed REG_HRS in FY 2009, with the same definition.

4. Accessing the ALB

Researchers can access the ALB through the Austin Information Technology Center (AITC) mainframe or by using the VHA Support Services Center menu to create summary reports.

4.1 Accessing ALB Though VSSC Menu

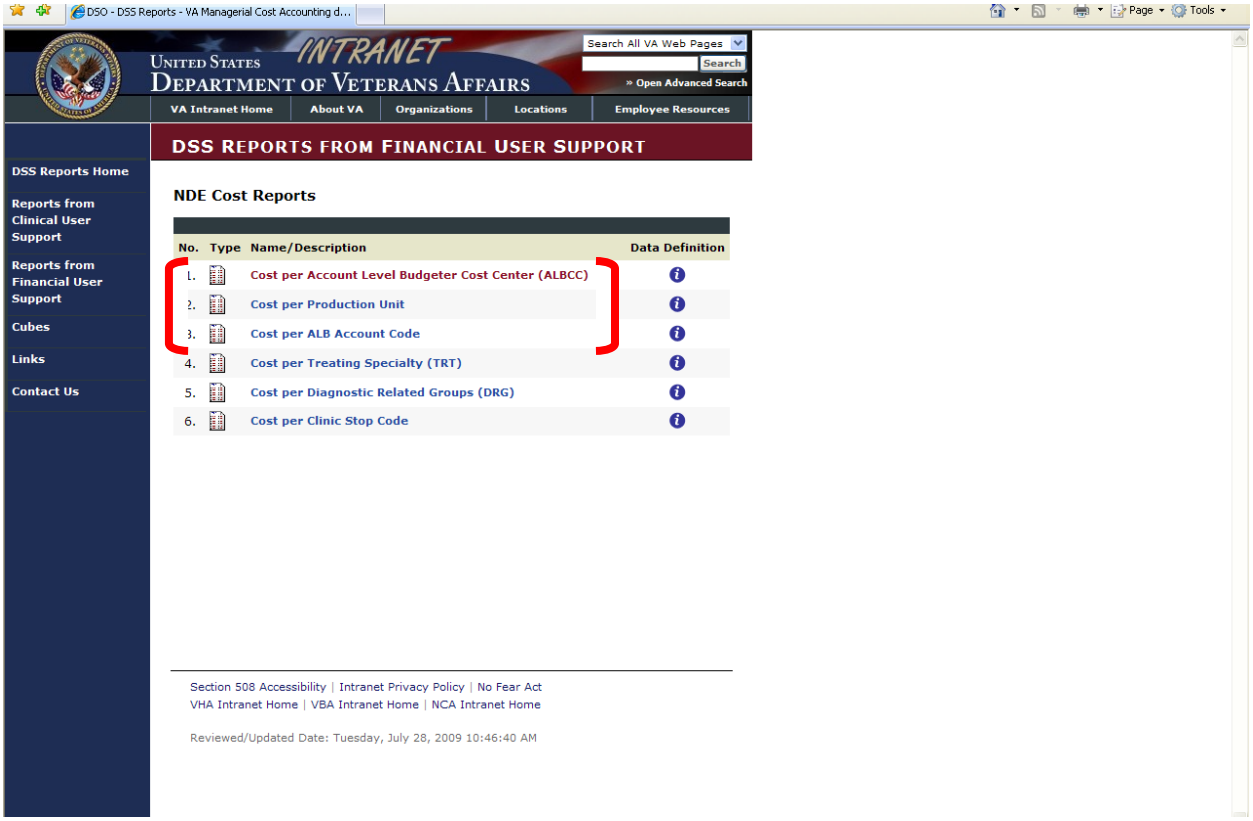
VA researchers can access ALB summary data via the VSSC Menu (http://vssc.med.va.gov/), only if they have access to the VA intranet. The user ID, password, and domain are the same as those used in exchange mail. Using Microsoft Internet Explorer (version 7 or higher), Figure 1 shows snapshot layout of the menu as of September 20, 2010. To get to the ALB reports, follow the instructions listed below:

1. Select "DSS Portal" under the Resource Management heading (Figure 1)

Figure 1: Accessing ALB through VSSC Menu

Source: http://vssc.med.va.gov/products.asp (accessed on September 20, 2010)

2. On the left, put your cursor over "VHA Reports Home" and then "Reports from Financial User Support."
3. The first option, "NDE Cost Reports" will direct you to the following page:



Here is a description of the reports that are available:

1	**Cost per Account Level Budgeter Cost Center (ALBCC):** Summarizes the total cost, labor hours and DSS FTEE *by ALBCC*. In this report, you can drill down to the ALB Account Code.
2	**Cost per Production Unit:** Summarizes the total cost, labor hours and DSS FTEE *by DSS production unit*. You can drill down to the associated DSS ALBCC by production unit or you can drill down even further to ALB account code.
3	**Cost per ALB Account Code:** Summarizes the total cost, labor hours and DSS FTEE *by ALB Account Code*, which is the lowest level of detail. This report can be utilized to view a specific account code, BOC or cost center.

These reports are "rollups", presenting aggregated and summarized data. The results can be viewed as a standard web report or downloaded to Microsoft Excel.

4.2 ALB files on the Austin Mainframe

The second way to access the ALB is directly through AITC. The process for gaining access to the Austin Mainframe is described in Appendix A. The data file is a SAS data set and can be accessed through Time Sharing Options (TSO) users account on the VHA mainframe computer. To enter the TSO environment, which is an interactive command line interpreter, a personal access code is required. Job Control Language (JCL) is used to run the SAS jobs.

In general, files of the form RMTPRD.MED.DSS.SAS.FYXX.ALBCC are national files, while files of the form RMTPRD.MED.DSS.SAS.FY07.VISNXX.ALBCC are VISN level files.
Note: VISNs are numbered 01-23, but there is no VISN 13 or VISN 14.

From FY 2001 through 2009, the location of the ALB files is as follows:

Table 4.2: ALB files on the Austin Mainframe

FY	Files available at Austin	Notes
2000-2002	RMTPRD.MED.DSS.SAS.FY00.ALBCC RMTPRD.MED.DSS.SAS.FY01.ALBCC RMTPRD.MED.DSS.SAS.FY02.ALBCC	No HR or VISN files in FY00, FY01, or FY02.
2003	RMTPRD.MED.DSS.SAS.FY03.ALBCC	No VISN level files in FY03.
2004	RMTPRD.MED.DSS.SAS.FY04.ALBCC RMTPRD.MED.DSS.SAS.FY04.VISN**XX**.ALBCC RMTPRD.MED.DSS.SAS.FY04.VISN**XX**.ALBCCN	This year starts VISN level files, where XX indicates VISN number.
2005	RMTPRD.MED.DSS.SAS.FY05.ALBCC RMTPRD.MED.DSS.SAS.FY05.VISN**XX**.ALBCC RMTPRD.MED.DSS.SAS.FY05.VISN**XX**.ALBHR	XX indicates VISN number.
2006	RMTPRD.MED.DSS.SAS.FY06.ALBCC RMTPRD.MED.DSS.SAS.FY06.VISN**XX**.ALBCC RMTPRD.MED.DSS.SAS.FY06.VISN**XX**.ALBHR	XX indicates VISN number.
2007	RMTPRD.MED.DSS.SAS.FY07.ALBCC RMTPRD.MED.DSS.SAS.FY07.VISN**XX**.ALBCC RMTPRD.MED.DSS.SAS.FY07.VISN**XX**.ALBHR	XX indicates VISN number.
2008	RMTPRD.MED.DSS.SAS.FY08.ALBCC RMTPRD.MED.DSS.SAS.FY08.VISN**XX**.ALBCC RMTPRD.MED.DSS.SAS.FY08.VISN**XX**.ALBHR	XX indicates VISN number.

FY	Files available at Austin	Notes
2009	RMTPRD.MED.DSS.SAS.FY09.VISN01.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN02.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN03.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN04.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN05.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN06.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN07.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN08.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN09.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN10.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN11.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN12.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN15.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN16.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN17.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN18.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN19.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN20.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN21.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN22.ALBCC RMTPRD.MED.DSS.SAS.FY09.VISN23.ALBCC	For FY09, the CC and HR components have been merged. There is no national file, just VISN files.

In addition, the monthly ALB NDEs generated by the AITC are available as text files, with variables delimited by the caret ("^") character, at:
MMSPRD.NDE.SV**XX**.FY10.NDEALB2.mmmyy
where **XX** is the production region number.

5. Using the ALB Extract for Research

Researchers may find the ALB useful to estimate costs. In particular, researchers can identify salary costs or compute the indirect (overhead costs) for an intervention. This type of cost detail is sometimes needed for studies involving micro-costing. These topics are described in more detail below.

Salary Costs

The ALB has detailed salary information. Researchers can summarize these data at different levels to identify salary costs. Mark Smith, Jesse Velez, and Alexander Cheng have developed HERC Technical Guides 12 and 25 comparing wage estimates from DSS (the ALB) and the Financial Management System.[7,8]

Ciaran Phibbs and colleagues are using the ALB in a current research project to estimate labor hours for specific departments (BOC and ALBCC variables) or at departments within facilities (BOC, ALBCC and STA3N variables). The ALB can be used to track hours and labor costs for nurse staffing for inpatient care units, by unit, and by month. The BOC allow the researcher to track different types of nursing labor (registered nurses, aides, etc.) and to separate management and advanced practice nurses from the bedside nursing staff. Further, the details on labor costs allow the exclusion of paid time off from staffing calculations. While paid time off is excluded, these hours do include "non-productive" nursing time such as time spent in training. Thus, the nursing hours don't exactly match patient care hours. In the DSS, the allocation of nursing hours to each unit is adjusted for average floating of nurses to other units but the accuracy of these estimates may vary by facility. The ALB extract, however, provides the most accurate data on nurse staffing by month than is available in any secondary source. The ALB also tracks the use of contract nurses, but does not distinguish by type of nursing labor.

Indirect Costs

Researchers often consider the cost of a new technology or intervention. Direct measurement methods can be used to estimate the direct costs of these services, such as the cost of an intervention that uses outreach workers for telephonic follow-up. Researchers need to estimate the indirect costs, often referred to as the overhead, for these interventions. Failure to include these costs results in an underestimate of the total cost of the intervention. The ALB can be used to estimate overhead costs. Paul Barnett and colleagues have done this in two instances, which are described in HERC Technical Reports 5 and 6 that can be found on our web site. [9,10]

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[7] Smith MW, Velez J. *A Guide To Estimating Wages Of VHA Employees*. Technical Report 12. Menlo Park, CA. VA Palo Alto, Health Economics Resource Center; 2004. at http://vaww.herc.research.va.gov/files/RPRT_179.pdf

[8] Smith MW, Cheng A. *A Guide to Estimating Wages of VHA Employees – FY2008 Update*. Technical Report 25. Menlo Park, CA. VA Palo Alto, Health Economics Resource Center; 2009. at http://vaww.herc.research.va.gov/files/RPRT_482.pdf

[9] Barnett PG, Berger MS. *Cost of Positron Emission Tomography: Method for Determining Indirect Cost.* Technical Report 5. Menlo Park, CA. VA Palo Alto, Health Economics Resource Center; 2003, at http://vaww.herc.research.va.gov/files/RPRT_120.pdf

Local Descriptions of Patient Care Departments

While the ALB contains only aggregate cost center data, the IPD data set contains patient-level data. More information about the IPD is available in the HERC *Research Guide to the DSS Intermediate Product Department Files.*[11]

Jean Yoon has used the ALBCC to obtain local descriptions of IPD departments, thus providing a link between patient-level and clinic-level data. The ALBCC can be used to convert codes for Intermediate Product Department into a specific local name for that unit.

The encounter-level data in the IPD extracts indicate the cost incurred in each department visited by the patient. The IPD codes used in that file also appear in the ALB extract, where they are called DCM_DEPT. For each value of DCM_DEPT at a particular station for a particular year, there is a locally assigned description, called IPDDESC. This variable can be used to find the locally assigned names of departments where costs were incurred in a particular outpatient visit or inpatient stay. This can be used to identify care provided by a specific inpatient ward or outpatient clinic.

Thus, one could use the ALB extract to:

- Create reports similar to the VSSC menu using the STA6A (sub-station), instead of STA3N or VISN. Note: Researchers interested in physician workload at this detail should consult their local DSS office.
- Use ALBACCT to detail the services/resources purchased (the BOC part) and the clinical/administrative entity that spent it (the CC part).
- Use ALBCC or DCM_DEPT to show the "sub-department" of the patient care unit at a given VA medical center.
- Use EXEMPT or EDI to split cost associated with other variables into finer component

[10] Barnett PG, Berger MS. *Indirect Costs of Specialized VA Mental Health Treatment.* Technical Report 5. Menlo Park, CA. VA Palo Alto, Health Economics Resource Center; 2003, at http://vaww.herc.research.va.gov/files/RPRT_119.pdf

[11] Yoon J, Gage M, Barnett P. *Research Guide to the DSS Intermediate Product Department Files*. Guidebook. Menlo Park, CA. VA Palo Alto, Health Economics Resource Center; 2009. at http://vaww.herc.research.va.gov/files/BOOK_471.pdf

Appendix A. Permission to Use ALB National Extracts

VA users with permission can access the DSS national extracts. Users must complete a "Time Sharing Request Form." Users who wish to work with true Social Security Numbers must also complete a "Privacy Act Statement." Users should also read the DSS data disclosure agreement intended to ensure proper handling and confidentiality of DSS cost data. The Data Disclosure Agreement and the access forms are included below. Additional information regarding the DSS access policy is found at http://klfmenu.med.va.gov/dss/access/access%20policy.htm.

The VA Information Resource Center (VIReC) may provide information on accessing VA datasets. Visit the VIREC website (http://vaww.virec.research.va.gov/) for additional information.

Time Sharing Request Form

The user must complete standard form VA Form 9957 to obtain permission to use VA files at the Austin Automation Center. A copy of this form is included below. Form 9957 must be signed by the approving official, the director of the VA center, and the information security officer who assigns the task codes. The applicant must provide his or her name, Austin account number, and one of the functional tasks codes listed below.

Task code	Access level
110AL99	DSS Financial Patient Data (FPD), this is the minimum access requirement
110TT10	DSS extracts with scrambled Social Security Numbers only
110TT11	DSS extracts and access to real Social Security Numbers for a particular medical center
110TT12	DSS extracts and access to real Social Security Numbers for a particular VISN
110TT13	DSS extracts and access to all real Social Security Numbers

Non-VA Users

Individuals not employed by or affiliated with the U.S. Department of Veterans Affairs who wish to use DSS data should contact the Customer User Provisioning System (CUPS) (formerly known as ACRS) Point of Contact at the VA Medical Center or VA Program Office with whom they are working.

Most non-VA researchers who wish to work with VA DSS do so by becoming affiliated with the VA as a Without Compensation Employee (WOC), ordinarily as part of a team working on VA-funded research. The procedures for applying for access are the same for WOC employees as they are for regular employees.

A.1 VA Privacy Statement

I am aware of the regulations and facility automated information system (AIS) security policies designed to ensure the confidentiality of all sensitive information. I am aware that information about patients or employees is confidential and protected from unauthorized disclosure by law. Improper disclosure of information to anyone not authorized to receive it may result in criminal charges and a fine from $5,000 - $20,000 under the Privacy Act of 1974, 5 U.S.C. 552a, and 38 U.S.C. Sections 5701 (Confidential Nature of Claims) and 7332 (Confidentiality of Certain Medical Records). I understand that my obligation to protect VA information does not end with either the termination of my access to national databases or with the termination of my government employment.

_____

Requestor name and title--typed or printed – First and Last)

_____

(Company/Organization)

_____

(Street Address)

_____

(City, State and ZIP Code)

_____ / _____

(Phone Number--Including Area Code)

_____ _____

(Signature) (Date)

A.2 VA 9957 ACRS Time Sharing Request

Department of Veterans Affairs

ACCESS FORM

PRIVACY ACT STATEMENT: The information is solicited under authority of Title 38, United States Code and Executive Order 9397 and is necessary to accomplish the action requested by the requester, including establishing, modifying or deleting a Customer Account. Furnishing the information on this form is voluntary; however, if the information is not furnished, we will be unable to take further action on your request.

NOTE: Information from this form is used to establish VA Accounts or to grant access to VA resources.

ARE YOU CURRENT ON YOUR SIGNED RULES OF BEHAVIOR; CYBER SECURITY AND PRIVACY TRAINING?	TYPE OF ACCESS	TYPE OF ACTION REQUESTED
☐ YES ☐ NO	☐ ZOS *(Mainframe)* ☐ WINDOWS ☐ EMAIL ☐ UNIX ☐ DATABASE ☐ LAN ACCOUNT ☐ USD ☐ OTHER *(Specify)*	☐ CREATE NEW CUSTOMER ☐ MODIFY EXISTING CUSTOMER ☐ DELETE EXISTING CUSTOMER

2. CUSTOMER INFORMATION

A. NAME *(Last, First, Middle Initial)*	B. CUSTOMER ID	C. TELEPHONE NUMBER *(Include Area Code)*
D.STATION (FACILITY) NUMBER	E. MAIL ROUTING SYMBOL OR STOP CODE	F. JOB TITLE
G. CONTRACTOR, OR IF TEMPORARY ACCESS, SHOW EXPIRATION DATE *(Month, day, year)*	H. CONTRACTOR OR OTHER GOVERNMENT ORGANIZATION, NAME EMPLOYER	
I. CONTRACTOR OR OTHER GOVERNMENT ORGANIZATION, OFFICE ADDRESS *(Street, City, State, Zip Code)*	J. ACTIVE DIRECTORY (AD) USERNAME	K. ACTIVE DIRECTORY (AD) DOMAIN
	L. E-MAIL ADDRESS	

NOTE: See reverse for instructions.

3. ACCESS REQUESTED

CHECK APPROPRIATE BOX		NAME OF FUNCTIONAL TASK CODES; PROFILES, WEB SERVERS; UNIX ACCOUNTS; DATABASE OR OTHER ACCESS	DEFINE LEVEL OF ACCESS REQUESTED OR CONCURRING SYSTEM MANAGER OF RECORD (SMR) DESIGNEE SIGNATURE AND TITLE *(If required)*
ADD	DELETE		
☐	☐		
☐	☐		
☐	☐		
☐	☐		
☐	☐		
☐	☐		
☐	☐		
☐	☐		

4. SIGNATURES

A. REQUESTING OFFICIAL & TITLE	B.DATE
C. APPROVING OFFICIAL & TITLE	D. DATE
E. SECOND APPROVING OFFICIAL & TITLE *(If required)*	F. DATE
G. NAME AND TITLE OF FACILITY POINT OF CONTACT OR INFORMATION SECURITY OFFICER	

VA FORM APR 2008 **9957** All prior editions of VA Form 9957 are not acceptable for submission. Adobe LiveCycle Designer 7.1

A.3 Data Disclosure Agreement

AGREEMENT TO NOT DISCLOSE DSS DATA

Department of Veterans Affairs Decision Support System Cost Data

In order to ensure the confidentiality of the DSS cost data collected and maintained by the Department of Veterans Affairs (VA), the Veterans Health Administration (VHA) expects the requestors and recipients of its data to agree to observe the following conditions and to comply with these requirements. These requirements apply to the use of all Decision Support System (DSS) file(s) or any data derived from such files(s).

The Requestor shall neither publish nor release to the public any cost information that is derived from the file(s) that identifies a specific facility or Veterans Integrated Services Network (VISN) and describes the cost of a specific patient cohort, clinical classification group (Diagnosis Related Group (DRG), Ambulatory Care Group (ACG), International Classification of Disease, 9th edition, Clinical Modification (ICD-9-CM) etc.), or DSS intermediate product. This restriction includes total costs as well as average costs. Exceptions allowing the disclosure of this facility level cost data may be granted on a case-by-case base by the facility or VISN Director. These cost data may be distributed for internal VA use and management reporting.

Proper care should be exercised to prevent the unwanted disclosure of confidential cost data to potential private sector competitors. The requestor shall not disclose, release, reveal, show, sell, rent, lease, loan, or otherwise grant access to the DSS data covered by this Agreement. Appropriate administrative, technical, procedural, and physical safeguards shall be established by the Recipient to protect the confidentiality of the data and to prevent unauthorized access to it. In the event the Requestor makes an unauthorized disclosure of these data, VHA may revoke requestor's access to all VHA DSS data.

_____

(Requestor name and title--typed or printed – First and Last)

_____

(Company or Organization)

_____

(Street Address)

_____

(City, State, and ZIP Code)

_____ _____

(Area Code) (Phone Number)

_____ _____

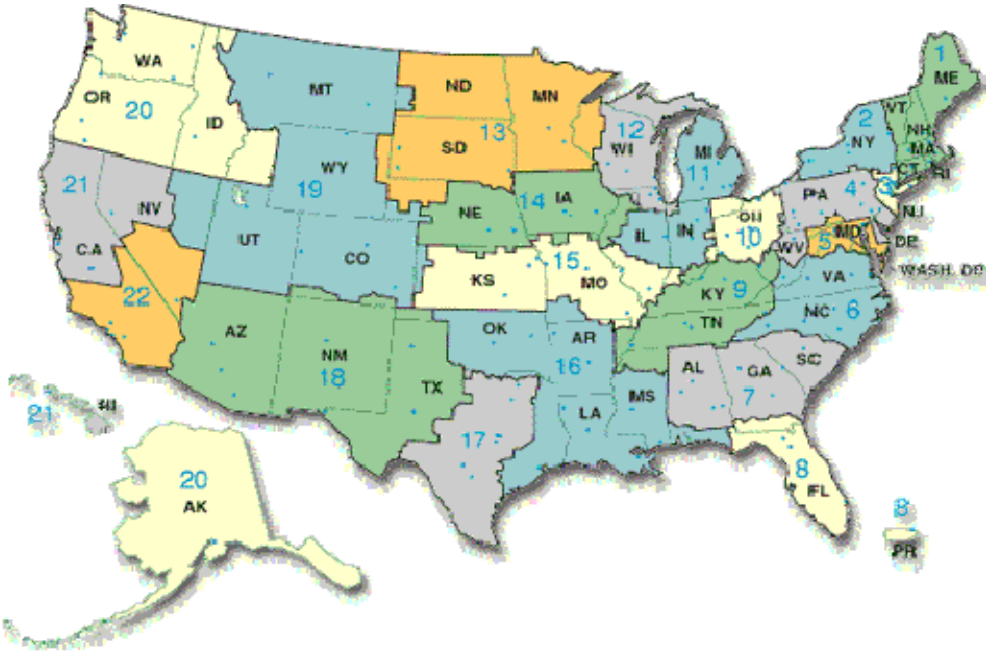
(Requestor's Signature) (Date)

Appendix B: VISN Number, Description, and Site Map

Each VHA healthcare facility is located in one of twenty-one VISNs spanning the United States and its territories. The map below shows the VISNs and the corresponding geographical regions. Effective FY 2010, each VISN was assigned a 3 digit station number that differs from the VAMC station numbers.

VISN	STA#	Network Name	VISN	STA#	Network Name
VISN1	478	VA New England Healthcare System	VISN12	489	VA Great Lakes Health Care System
VISN2	479	VA Healthcare Network Upstate New York	VISN15	491	VA Heartland Network
VISN3	480	VA New York New Jersey Health Care Network	VISN16	492	South Central VA Health Care Network
VISN4	481	VA Healthcare VISN 4	VISN17	493	VA Heart of Texas Health Care Network
VISN5	482	VA Capital Health Care Network	VISN18	494	VA Southwest Health Care Network
VISN6	483	Mid-Atlantic Health Care Network	VISN19	495	Rocky Mountain Network
VISN7	484	VA Southeast Network	VISN20	496	VA Northwest Health Network
VISN8	485	VA Sunshine Healthcare Network	VISN21	497	Sierra Pacific Network
VISN9	486	Mid South Healthcare Network	VISN22	498	VA Desert Pacific Healthcare Network
VISN10	487	VA Healthcare System of Ohio	VISN23	499	VA Midwest Health Care Network*
VISN11	488	Veterans in Partnership (VIP) Network			

*Originally, there were twenty-two VISNs, but VISN 13 and 14 merged to form VISN23 in January 2004.



Appendix C: STA3N (Parent Stations) **STA3N – Code and Description**

(358) MANILA, PI	(554) DENVER, CO	(635) OKLAHOMA CITY, OK
(402) TOGUS, ME	(556) NORTH CHICAGO, IL	(636) NEBRASKA-W IOWA, NE
(405) WHITE RIVER JCT, VT	(557) DUBLIN, GA	(637) ASHEVILLE, NC
(436) FORT HARRISON, MT	(558) DURHAM, NC	(640) PALO ALTO, CA
(437) FARGO, ND	(559) N. CHICAGO-LOVELL, IL	(642) PHILADELPHIA, PA
(438) SIOUX FALLS, SD	(561) NEW JERSEY HCS, NJ	(644) PHOENIX, AZ
(442) CHEYENNE, WY	(562) ERIE, PA	(646) PITTSBURGH, PA
(459) HONOLULU, HI	(564) FAYETTEVILLE, AR	(648) PORTLAND, OR
(460) WILMINGTON, DE	(565) FAYETTEVILLE, NC	(649) PRESCOTT, AZ
(463) ANCHORAGE, AK	(568) BLACK HILLS HCS, SD	(650) PROVIDENCE, RI
(501) ALBUQUERQUE, NM	(570) FRESNO, CA	(652) RICHMOND, VA
(502) ALEXANDRIA, LA	(573) GAINESVILLE, FL	(653) ROSEBURG OR
(503) ALTOONA, PA	(575) GRAND JUNCTION, CO	(654) RENO, NV
(504) AMARILLO, TX	(578) HINES, IL	(655) SAGINAW, MI
(506) ANN ARBOR, MI	(580) HOUSTON, TX	(656) ST. CLOUD, MN
(508) ATLANTA, GA	(581) HUNTINGTON, WV	(657) ST. LOUIS, MO
(509) AUGUSTA, GA	(583) INDIANAPOLIS, IN	(658) SALEM, VA
(512) BALTIMORE HCS, MD	(585) IRON MOUNTAIN, MI	(659) SALISBURY, NC
(515) BATTLE CREEK, MI	(586) JACKSON, MS	(660) SALT LAKE CITY, UT
(516) BAY PINES, FL	(589) KANSAS CITY, MO	(662) SAN FRANCISCO, CA
(517) BECKLEY, WV	(590) HAMPTON, VA	(663) VA PUGET SOUND, WA
(518) BEDFORD, MA	(593) LAS VEGAS, NV	(664) SAN DIEGO CA
(519) BIG SPRING, TX	(595) LEBANON, PA	(666) SHERIDAN, WY
(520) BILOXI, MS	(596) LEXINGTON, KY	(667) SHREVEPORT, LA
(521) BIRMINGHAM, AL	(598) LITTLE ROCK, AR	(668) SPOKANE, WA
(523) VA BOSTON HCS, MA	(600) LONG BEACH, CA	(671) SAN ANTONIO, TX
(526) BRONX, NY	(603) LOUISVILLE, KY	(672) SAN JUAN, PR
(528) BUFFALO, NY	(605) LOMA LINDA, CA	(673) TAMPA, FL
(529) BUTLER, PA	(607) MADISON, WI	(674) TEMPLE, TX
(531) BOISE, ID	(608) MANCHESTER, NH	(675) ORLANDO, FL
(534) CHARLESTON, SC	(610) NORTH INDIANA HCS, IN	(676) TOMAH, WI
(537) CHICAGO (W.SIDE), IL	(612) N. CALIFORNIA, CA	(678) TUCSON, AZ
(538) CHILLICOTHE, OH	(613) MARTINSBURG, WV	(679) TUSCALOOSA, AL
(539) CINCINNATI, OH	(614) MEMPHIS, TN	(687) WALLA WALLA, WA
(540) CLARKSBURG, WV	(618) MINNEAPOLIS, MN	(688) WASHINGTON, DC
(541) CLEVELAND-WADE PARK, OH	(619) MONTGOMERY-WEST, AL	(689) VA CONNECTICUT HCS, CT
(542) COATESVILLE, PA	(620) VA HUDSON VAL HCS, NY	(691) WEST LOS ANGELES, CA
(544) COLUMBIA, SC	(621) MOUNTAIN HOME, TN	(692) WHITE CITY, OR
(546) MIAMI, FL	(623) MUSKOGEE, OK	(693) WILKES-BARRE, PA
(548) WEST PALM BEACH, FL	(626) MIDDLE TENN. HCS, TN	(695) MILWAUKEE, WI
(549) DALLAS, TX	(629) NEW ORLEANS, LA	(756) EL PASO, TX
(550) DANVILLE, IL	(630) NY HARBOR HCS, NY	(757) COLUMBUS, OH
(552) DAYTON, OH	(631) NORTHHAMPTON, MA	