Guide to VA Data on Health Care Providers

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Acknowledgement:
We would like to acknowledge help from the Decision Support Office. VA datasets are a dynamic resource that changes over time. Researchers are encouraged to check for updates and consult additional documentation.
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### Acronym Glossary

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>AITC</td>
<td>Austin Information Technology Center <em>(VA national data center in Austin, Texas)</em></td>
</tr>
<tr>
<td>ALB</td>
<td>Account Level Budgeter <em>(module in DSS production system)</em></td>
</tr>
<tr>
<td>AP</td>
<td>Associate Provider practicing under precepting Primary Care Provider <em>(e.g. nurse practitioners, physicians assistants)</em></td>
</tr>
<tr>
<td>DSS</td>
<td>Decision Support System <em>(derived database built from VHA data sources)</em></td>
</tr>
<tr>
<td>DSO</td>
<td>DSS Support Office</td>
</tr>
<tr>
<td>FTEE</td>
<td>Full Time Employee Equivalent <em>(employee working 10 hours/week = 0.25 FTEE)</em></td>
</tr>
<tr>
<td>FY</td>
<td>Federal Fiscal Year</td>
</tr>
<tr>
<td>HERC</td>
<td>Health Economic Resource Center <em>(Menlo Park, CA)</em></td>
</tr>
<tr>
<td>NHCPD</td>
<td>National Health Care Practitioner Database</td>
</tr>
<tr>
<td>NPCD</td>
<td>National Patient Care Database</td>
</tr>
<tr>
<td>IEN</td>
<td>Internal Entry Number</td>
</tr>
<tr>
<td>PCMM</td>
<td>Primary Care Management Module</td>
</tr>
<tr>
<td>PCP</td>
<td>Primary Care Provider</td>
</tr>
<tr>
<td>SSN</td>
<td>Social Security Number</td>
</tr>
<tr>
<td>VA</td>
<td>Veterans Affairs</td>
</tr>
<tr>
<td>VHA</td>
<td>Veterans Health Administration</td>
</tr>
<tr>
<td>VSSC</td>
<td>VHA Support Service Center <em>(VA intranet)</em></td>
</tr>
<tr>
<td>VISN</td>
<td>Veterans Integrates Service Network <em>(21 VA service areas in the US)</em></td>
</tr>
<tr>
<td>VistA</td>
<td>Veterans Health Information Systems and Technology Architecture</td>
</tr>
</tbody>
</table>
## Index of VA Datasets with Information on Providers

<table>
<thead>
<tr>
<th>Dataset</th>
<th>Description*</th>
<th>Provider ID format</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Health Care Practitioner Database</td>
<td>Outpatient and primary care provider record, containing name, ID number, and real and scrambled Social Security Number. Does not contain provider type.</td>
<td>18-character provider ID</td>
</tr>
<tr>
<td>(NHCPD)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary Care Management Module (PCMM)</td>
<td>This module contains 4 classes of files. The first is organized by patient ID; it is a record of patient assignments to primary care teams and primary/associate providers. The others are organized by provider ID: FTE and panel size assignments per provider, primary care provider listings with real and scrambled SSN, and provider listings with provider type (Person Class) and team purpose.</td>
<td>18-character provider ID</td>
</tr>
<tr>
<td>Decision Support System (DSS) SAS® Files</td>
<td>This SAS® dataset is composed of files that record patient, clinical, and billing data, all organized by encounter number: Discharge (DISCH), Lab Results (LAR), Lab Tests (LAB), Outpatient (OPAT), Radiology (RAD), Surgery (SUR), and Treating Specialty (TRT). These files contain primary care provider and ordering provider ID numbers and provider types. This dataset also contains Account Level Budget Cost Center (ALBCC) files, which do not contain individual provider variables and are not discussed in this guidebook.</td>
<td>11-character provider ID</td>
</tr>
<tr>
<td>VHA Medical SAS® Datasets</td>
<td>These SAS® datasets contain records of inpatient (IE) and outpatient (SE) encounters and outpatient visits (SF), organized by encounter number, with patient and clinical data. These files contain up to 10 provider ID’s and provider types for each encounter. These datasets also contain Patient Treatment Files (PTF) and several other types of files that do not contain individual provider variables and are not discussed in this guidebook.</td>
<td>18-character provider ID</td>
</tr>
</tbody>
</table>

*see corresponding section of text for further information
# Index of Key Variables on Providers

<table>
<thead>
<tr>
<th>Variable</th>
<th>Description</th>
<th>Datasets</th>
<th>Files containing variable</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROVID</td>
<td>18-character provider ID</td>
<td>NHCPD, PCMM, VHA Medical SAS® Datasets</td>
<td>MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME, MDPPRD.MDP.SAS.PCMM.FTEEyy, MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME.PCMM, MDPPRD.MDP.SAS.SEyy, MDPPRD.MDP.SAS.IEyy</td>
</tr>
<tr>
<td>pcp, ord_pcp, ord_prov, pcp_dss</td>
<td>11-character provider ID, used for primary care and ordering providers</td>
<td>DSS SAS® Files</td>
<td>RMTPRD.MED.DSS.SAS.FYyy</td>
</tr>
<tr>
<td>PREALSSN</td>
<td>Provider real SSN</td>
<td>NHCPD, PCMM</td>
<td>MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME, MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME.ALLSRC, MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME.PCMMFTEE, MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME.PCMM</td>
</tr>
<tr>
<td>PSCRSSN</td>
<td>Provider scrambled SSN</td>
<td>NHCPD, PCMM</td>
<td>MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME, MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME.ALLSRC, MDPPRD.MDP.SAS.PCMMyy open and closed, MDPPRD.MDP.SAS.PCMM.FTEEyy, MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME.PCMMFTEE, MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME.PCMM</td>
</tr>
<tr>
<td>PCP_PERSONCLASS</td>
<td>Provider type based on national classification</td>
<td>PCMM</td>
<td>MDPPRD.MDP.SAS.PCMM.FTEEyy, MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME.PCMM</td>
</tr>
<tr>
<td>AP_PERSONCLASS</td>
<td>Provider type based on national classification</td>
<td>PCMM</td>
<td>MDPPRD.MDP.SAS.PCMM.FTEEyy, MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME.PCMM</td>
</tr>
<tr>
<td>PROV1,...,PROV10</td>
<td>Provider type same format as above</td>
<td>VHA Medical SAS® Datasets, DSS SAS® Files</td>
<td>MDPPRD.MDP.SAS.SEyy, MDPPRD.MDP.SAS.IEyy, RMTPRD.MED.DSS.SAS.FYyy</td>
</tr>
<tr>
<td>pcptyp, ord_prov_type</td>
<td>Provider type same format as above</td>
<td>VHA Medical SAS® Datasets, DSS SAS® Files</td>
<td>MDPPRD.MDP.SAS.SEyy, MDPPRD.MDP.SAS.IEyy, RMTPRD.MED.DSS.SAS.FYyy</td>
</tr>
<tr>
<td>TEAM_PURPOSE</td>
<td>Team purpose description</td>
<td>PCMM</td>
<td>MDPPRD.MDP.SAS.PCMMyy open and closed</td>
</tr>
<tr>
<td>PROV_ROLE</td>
<td>Provider role</td>
<td>PCMM</td>
<td>MDPPRD.MDP.SAS.PCMMyy open and closed</td>
</tr>
</tbody>
</table>
1. Overview

A diverse set of providers, including physicians, nurses, mental health professionals and others, care for patients in the Veterans Health Administration (VHA). Health services researchers who use cost and utilization data to study efficiency and outcomes are often interested in identifying the provider of a service. This information is needed to evaluate the effect of interventions directed at providers. It is also needed for studies that evaluate the relationship between provider characteristics and the efficiency or quality of care. It can be useful for any research on patient outcomes, allowing the analyst to control for the correlation between patients who are seen by the same provider.

This Guidebook provides an overview of provider-related variables in the Department of Veterans Affairs (VA) datasets, and the relationships between them. The VA data discussed in this guide may be accessed at the Austin Information Technology Center by VA employees who obtain permission to utilize the particular dataset(s) needed (see Appendix A). Research use requires additional approval by the Research Development Committee and a committee for the protection of Human Subjects of Research.

Provider identification numbers. Provider identification numbers are used in datasets of VA outpatient visits, inpatient encounters, primary care assignments, hospital discharges, prescription fills, and laboratory and radiology orders. A national dataset allows these numbers to be linked to a specific health care provider throughout the VA system.

Provider identification numbers are based on the Internal Entry Number (IEN) assigned to the provider in VistA, the system of electronic medical records used by VA medical centers. Since this number is assigned by a local health care facility, a provider who works at multiple facilities will have a different identification number assigned by each facility. Two closely located facilities may sometimes share a single VistA system, as indicated by the same STA3N code, in which case, the two facilities will share the same provider IEN. VA is in the process of adopting a new national system of provider identifiers, but these are not yet used in VA utilization datasets.

An 18-character provider identifier is used in VA Medical SAS® and Primary Care Management Module (PCMM) databases. This format is composed of the 3 digit station identifier (STA3N) followed by the IEN. A variable length string of zeros is then inserted between STA3N and IEN to create a consistent 18-character field. Files that use this format include the National Health Care Practitioner Database (NHCPD), the Primary Care Management Module (PCMM), and the VHA Medical SAS® Datasets, including the Inpatient Encounter (IE) and Outpatient Encounter (SE) files.

An 11-character provider identifier is used by VA Decision Support System (DSS) SAS® files. This format is composed of the character “2” followed by the IEN. DSS does not include the 3 digit station identifier as part of the provider number. In DSS data, two records that have the

1 Current file definitions and proc contents can be found at: http://vaww4.va.gov/NDS/SAS/SASDataDictionaries/SASDataDictionaries.asp
same provider number will be referring to two different providers if the records refer to different medical centers that do not share a VistA system (as indicated by different STA3N codes).

Appendix B: Converting DSS Provider ID describes the procedure for combining the DSS format with the medical center number to yield a provider identifier that is compatible with the PCMM and medical SAS datasets.

Provider types. The type of provider, (e.g., physician, nurse practitioner, or social worker) is indicated in several of of the utilization data sets, including the Medical SAS datasets of outpatient and inpatient encounters, PCMM, and several DSS files. It is not in the National Health Care Practitioner Database (NHCPD), however.

VA uses the Provider Classification System, a 6-character code the represents the type of provider and the provider’s area of specialization. This system was developed by the Centers for Medicare and Medicaid Services and the American National Standards Institute, but is currently administered by the National Uniform Claim Committee (NUCC). The VA implementation of this coding system is established by VHA Directive 2005-059 and the entire taxonomy can be found at [http://vaww.aac.va.gov/npcd/PersonClassTaxonomy.xls](http://vaww.aac.va.gov/npcd/PersonClassTaxonomy.xls).

The provider type variable has different names in the VA datasets that employ it. It is called primary care provider person class (PCP_PERSONCLASS) and associate provider person class (AP_PERSONCLASS) in the primary care files. It is called the provider type (PROV1-PROV10) in the Medical SAS datasets. DSS files call this variable ordering provider type (ORD_PROV_TYPE) and the primary care provider type (PCPTYP).

National Health Care Practitioner Database. The National Health Care Practitioner Database (NHCPD) consists of several files that include the 18 digit provider identifier number, and the provider’s name and scrambled social security number (SCRSSN). The scrambled social security number uniquely identifies a provider across all facilities. The analyst can use this number to find all the records of a particular provider, and thus all of the identification numbers used to characterize that provider’s encounters at different stations.

Primary Care Management Module. Provider files in the Primary Care Management Module (PCMM) include additional information. They report the amount of time that the provider was assigned to deliver primary care and the maximum size of the provider’s patient panel. In these files, Associate Providers (AP), who are non-physician clinicians such as Physicians Assistants, Nurse Practitioners or Residents, are linked to a supervising Primary Care Physician (PCP). These files also provide a team identifier and a code that indicates the team’s purpose. Currently, the PCMM module is being modified to accommodate the Patient Aligned Care Team (PACT) model, by designating teamlets with a single PCP, and a minimum of one RN, one LPN/MA, and one clerk. These changes have not yet been reflected in the data extracts housed at the Austin Information Technology Center. Since the changes have not yet been implemented, they are not discussed in this guidebook.

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Other provider characteristics. With the proper permission, a provider’s encrypted social security number can be decoded and the provider identification number can be linked to characteristics of the provider in the Personnel and Accounting Integrated Data System (PAID). PAID includes the gender, age, education and certification, hire date, and the time employed at the particular medical center, and the provider’s rate of pay. Information on the data in PAID can be found in the HERC Guidebook for Research Use of PAID Data.  

Documentation updates. The reader should check to see if provider data have changed since this guidebook was written. A comprehensive list of SAS files of VA data is available from National Data Systems: http://vaww4.va.gov/NDS/SAS/SASDataDictionaries/SASDataDictionaries.asp. The most current information on DSS files is available from the VA Decision Support Organization: http://vaww.dss.med.va.gov/.

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2. National Health Care Practitioner Database (NHCPD)

Filenames:

<table>
<thead>
<tr>
<th>Filename</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME</td>
<td>Outpatient Encounter Providers only.</td>
</tr>
<tr>
<td>MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME.ALLSRC</td>
<td>All providers, including those in PCMM Patient, PCMM FTEE, and Outpatient Encounter files.</td>
</tr>
</tbody>
</table>

The NHCPD file for each fiscal year (FY) contains records organized by provider identification number. It includes the provider name, and the real and scrambled social security numbers of VA health care providers. This database supports VHA Privacy Act requirements by segregating personal information about health care practitioners, such as name and social security number, from patient information.5

Of the above files, the first contains only providers that provide outpatient care, while the second contains all providers, including primary care and other specialties.

The NHCPD files contain the following variables:

<table>
<thead>
<tr>
<th>#</th>
<th>Variable</th>
<th>Type</th>
<th>Len</th>
<th>Format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>PREALSSN</td>
<td>Num</td>
<td>8</td>
<td>SSN11</td>
<td>PROVIDER REAL SSN</td>
</tr>
<tr>
<td>2</td>
<td>PROVFNAME</td>
<td>Char</td>
<td>25</td>
<td></td>
<td>PROVIDER FIRST NAME</td>
</tr>
<tr>
<td>5</td>
<td>PROVID</td>
<td>Char</td>
<td>18</td>
<td></td>
<td>PROVIDER IDENTIFICATION</td>
</tr>
<tr>
<td>1</td>
<td>PROVLNAME</td>
<td>Char</td>
<td>35</td>
<td></td>
<td>PROVIDER LAST NAME</td>
</tr>
<tr>
<td>3</td>
<td>PROVMNAME</td>
<td>Char</td>
<td>1</td>
<td></td>
<td>PROVIDER MIDDLE NAME</td>
</tr>
<tr>
<td>6</td>
<td>PSCRSSN</td>
<td>Num</td>
<td>5</td>
<td>SSN11</td>
<td>PROVIDER SCRAMBLED SSN</td>
</tr>
</tbody>
</table>

The NHCPD utilizes an 18-character provider ID format, which is composed of the station identifier (STA3N) followed by the Internal Entry Number (IEN). The NHCPD does not include a provider type variable; however, it is included in the PCMM module.

Provider ID’s are assigned locally in each station, therefore, a single provider who works at multiple facilities that belong to different VistA systems will have multiple ID’s in the VA network. The real and scrambled social security numbers in these files may be used to link provider ID’s from different stations to a unique provider. The access rules for these files are the same as for patient real SSN files (see Appendix A).

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5 p. 75, *VHA Corporate Database Monograph 2010*, at:
3. Primary Care Management Module (PCMM)

The Primary Care Management Module is a part of the VA electronic medical records system, VistA. Managers use PCMM to define a primary care team, the positions in the team, assign staff to the positions, and assign patients to a team and to a Primary Care Provider (PCP) or Associate Provider (AP). Associate Providers are non-physician clinicians (such as physician’s assistants, nurse practitioners or residents) who may provide care under the supervision of a presiding PCP. PCMM data are extracted from VistA to create the SAS® files listed below.

All patients receiving primary care services in a VA medical center (VA staffed or contracted) must be assigned a provider in PCMM. Patients are assigned at the time they present for their first primary care appointment and not when the first appointment is scheduled. Each patient must have only one assigned PCP within the VA system, unless the patient has two permanent geographically distinct residences or is receiving highly-complex dual care for spinal cord injuries. Other episodic care must be coordinated with a single PCP. Additional information about PCMM may be found in the VHA Handbook 1101.02: Primary Care Management Module (PCMM)

Files with “NAT” in the filename include real Social Security Numbers; the access rules for these files are the same as for patient real SSN’s (see Appendix A).

PCMM files also include the Provider Type (PERSONCLASS) variable described in the overview.

The PCMM database includes files organized by Patient ID (i) and files organized by Provider ID (ii-iv). Patient ID’s are assigned at the STA3N level just as the provider ID’s, therefore the same patient may have different ID’s at different stations. The Patient ID variable begins with a STA3N number, followed by a variable number of zeroes, and then a numerical patient ID assigned at the station in the local VistA system.

3.1 PCMM Primary and Associate Providers Assignments per Patient: PCMMyy

a. Closed Provider Assignments

Filenames:
MDPFPRD.MDP.SAS.PCMMyyC  PCMM closed primary and associate providers.

The PCMMyyC files for each fiscal year (yy) are organized by patient ID (PATID). These files contain patient assignments to providers that are no longer current. The date that the assignment ended is included (PCP_ASGNEND). These assignments are considered closed, hence the name of the file. Established patients who have been assigned to the PCP team for more than 12 months, but have not been seen by their current or prior PCP or AP in the past 24 months become inactive. Newly assigned patients who have not been seen by their PCP or AP in the past 12 months are also considered inactive.

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The PCMMyyC files contain the following variables:

The **TEAM_PURPOSE** variable defines the role of the team. Our tabulation of values for FY10 yielded the following distribution:

### Table 3: Team_PURPOSE variable values

<table>
<thead>
<tr>
<th>CODE</th>
<th>TEAM_PURPOSE</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Frequency</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>PRIMARY CARE</td>
<td>32622</td>
<td>99.10</td>
<td>32622</td>
<td>99.10</td>
</tr>
<tr>
<td>3</td>
<td>INPATIENT</td>
<td>5</td>
<td>0.02</td>
<td>32627</td>
<td>99.11</td>
</tr>
<tr>
<td>4</td>
<td>MENTAL HEALTH</td>
<td>23</td>
<td>0.07</td>
<td>32650</td>
<td>99.18</td>
</tr>
<tr>
<td>6</td>
<td>COMMUNITY CARE</td>
<td>23</td>
<td>0.07</td>
<td>32673</td>
<td>99.25</td>
</tr>
<tr>
<td>7</td>
<td>SPECIAL TRT</td>
<td>59</td>
<td>0.18</td>
<td>32732</td>
<td>99.43</td>
</tr>
<tr>
<td>8</td>
<td>SUB SPECIALTY</td>
<td>161</td>
<td>0.49</td>
<td>32893</td>
<td>99.92</td>
</tr>
<tr>
<td>9</td>
<td>PERSONAL LIST</td>
<td>26</td>
<td>0.08</td>
<td>32919</td>
<td>100.00</td>
</tr>
</tbody>
</table>

Primary Care is the most common value by far, and several defined values do not appear to be used. A full list of Team Purpose values and descriptions can be found in Appendix C. Team Purpose field is often left blank.

**AP_ASGN_ID** and **PCP_ASGN_ID** are the same as **AP_PROVID** and **PCP_PROVID**, respectively, but without the leading 3-digit station identifier. Our tabulation indicates that the AP variables are often left blank in these files.

**PSEUDO** variable indicates that the SSN is a pseudo social security number when the value of **PSEUDO** is not blank. This usually happens when the patient is a newborn infant.
b. **Open Provider Assignments**

**Filenames:**
- MDPPRD.MDP.SAS.PCMMyyO: PCMM open primary and associate providers.
- MDPPRD.MDP.SAS.PCMMyyR: PCMM open primary and associate providers. For 2004-06 only.
- MDPPRD.MDP.SAS.PCMMyy: PCMM open primary and associate providers. For 2001 only.

These files are exactly the same as above, however open assignments are ongoing and have not reached the assignment end date.

These open provider files contain the variables listed in Table 3.
3.2 FTE and Panel Size Assignments per Provider: PCMM.FTEE

Filenames:
MDPPRD.MDP.SAS.PCMM.FTEEyy  Primary care providers with max panel size and FTEE.

The FTE variable refers to the Full Time Employee Equivalent (FTEE) assigned to Primary Care for this provider (e.g. an employee working 10 hours/week = 0.25 FTEE). This value usually ranges from 0.0 to 1.0. However, it can be greater than 1.0 when FTE has been entered for associate providers in the VistA system.

Maximum Panel Size assignment is the estimated capacity for a primary care provider at a single division based on the number of primary care rooms, direct FTE, support staff FTE, and predicted visit intensity of the division.

The FTE and Maximum Panel Size assignments are made at the STA3N level, therefore, the same provider may have different assignments at different stations.

For a discussion of FTE and panel size assignments, see VHA Handbook 1101.02: Primary Care Management Module (PCMM) and the Primary Care Management Module User Manual.

The above files, organized by Provider ID, contain the following provider-related variables:

<table>
<thead>
<tr>
<th>#</th>
<th>Variable</th>
<th>Type</th>
<th>Len</th>
<th>Format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>AAC_INSERT</td>
<td>Num</td>
<td>8</td>
<td>DATETIME22.</td>
<td>DATE RECORD INSERTED</td>
</tr>
<tr>
<td>7</td>
<td>AAC_UPDATE</td>
<td>Num</td>
<td>8</td>
<td>DATETIME22.</td>
<td>DATE RECORD UPDATED</td>
</tr>
<tr>
<td>10</td>
<td>END_DATE</td>
<td>Num</td>
<td>8</td>
<td>DATETIME22.</td>
<td>ASSOCIATION END</td>
</tr>
<tr>
<td>5</td>
<td>FTE</td>
<td>Num</td>
<td>8</td>
<td></td>
<td>PRIMARY CARE FTE</td>
</tr>
<tr>
<td>4</td>
<td>MAXPANELSIZE</td>
<td>Num</td>
<td>3</td>
<td></td>
<td>MAXIMUM PANEL SIZE</td>
</tr>
<tr>
<td>3</td>
<td>PERSONCLASS</td>
<td>Char</td>
<td>6</td>
<td>$PERCLS.</td>
<td>PERSON CLASS</td>
</tr>
<tr>
<td>11</td>
<td>PROVID</td>
<td>Char</td>
<td>18</td>
<td></td>
<td>PROVIDER IDENTIFIER</td>
</tr>
<tr>
<td>6</td>
<td>PSCRSSN</td>
<td>Num</td>
<td>5</td>
<td>SSN11.</td>
<td>PROVIDER SCRAMBLED SSN</td>
</tr>
<tr>
<td>9</td>
<td>START_DATE</td>
<td>Num</td>
<td>8</td>
<td>DATETIME22.</td>
<td>ASSOCIATION START</td>
</tr>
<tr>
<td>1</td>
<td>STA3N</td>
<td>Num</td>
<td>3</td>
<td>STA3NL.</td>
<td>PARENT STATION</td>
</tr>
<tr>
<td>2</td>
<td>STA6A</td>
<td>Char</td>
<td>6</td>
<td>$STA56L.</td>
<td>PARENT STATION WITH SUFFIX</td>
</tr>
</tbody>
</table>
### 3.3 Primary Care Provider Listings: PROVNAME.PCMMFTEE

**Filenames:**

MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME.PCMMFTEE  
Primary care providers with SSN.

These files contain the real and scrambled SSN, but no FTEE or panel size.

<table>
<thead>
<tr>
<th>#</th>
<th>Variable</th>
<th>Type</th>
<th>Len</th>
<th>Format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ORGTYPE</td>
<td>Char</td>
<td>8</td>
<td></td>
<td>ORGANIZATION TYPE CODE</td>
</tr>
<tr>
<td>2</td>
<td>PREALSSN</td>
<td>Num</td>
<td>8</td>
<td>SSN11.</td>
<td>PROVIDER REAL SSN</td>
</tr>
<tr>
<td>4</td>
<td>PROVFNAME</td>
<td>Char</td>
<td>25</td>
<td></td>
<td>PROVIDER FIRST NAME</td>
</tr>
<tr>
<td>9</td>
<td>PROVID</td>
<td>Char</td>
<td>18</td>
<td></td>
<td>PROVIDER IDENTIFIER</td>
</tr>
<tr>
<td>3</td>
<td>PROVLNAME</td>
<td>Char</td>
<td>35</td>
<td></td>
<td>PROVIDER LAST NAME</td>
</tr>
<tr>
<td>5</td>
<td>PROVMNAME</td>
<td>Char</td>
<td>25</td>
<td></td>
<td>PROVIDER MIDDLE NAME</td>
</tr>
<tr>
<td>6</td>
<td>PROVPRE</td>
<td>Char</td>
<td>10</td>
<td></td>
<td>PROVIDER PREFIX</td>
</tr>
<tr>
<td>7</td>
<td>PROVSUF</td>
<td>Char</td>
<td>10</td>
<td></td>
<td>PROVIDER SUFFIX</td>
</tr>
<tr>
<td>8</td>
<td>PSCRSSN</td>
<td>Num</td>
<td>5</td>
<td>SSN11.</td>
<td>PROVIDER SCRAMBLED SSN</td>
</tr>
</tbody>
</table>

The **ORGTYPE** variable is currently blank and is not being used.
3.4 Provider Role and Team Purpose Listings: PROVNAME.PCMM

Filenames:
MDPPRD.PRO.SAS.NAT.FYyy.PROVNAME.PCMM  PCMM provider file.

These files, organized by Provider ID, contain the following variables:

<table>
<thead>
<tr>
<th>#</th>
<th>Variable</th>
<th>Type</th>
<th>Len</th>
<th>Format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>ASGNEND</td>
<td>Num</td>
<td>8</td>
<td>DATE9.</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>ASGNSTRT</td>
<td>Num</td>
<td>8</td>
<td>DATE9.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>CUR_DATE</td>
<td>Num</td>
<td>8</td>
<td>DATE9.</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>PERSONCLASS</td>
<td>Char</td>
<td>6</td>
<td></td>
<td>PROVIDER TYPE</td>
</tr>
<tr>
<td>15</td>
<td>PREALSSN</td>
<td>Num</td>
<td>5</td>
<td>SSN11.</td>
<td>PROVIDER REAL SSN</td>
</tr>
<tr>
<td>3</td>
<td>PROV_ROLE</td>
<td>Char</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>PROVNAME</td>
<td>Char</td>
<td>25</td>
<td></td>
<td>PROVIDER FIRST NAME</td>
</tr>
<tr>
<td>4</td>
<td>PROVID</td>
<td>Char</td>
<td>18</td>
<td></td>
<td>PROVIDER IDENTIFIER</td>
</tr>
<tr>
<td>5</td>
<td>PROVID2</td>
<td>Char</td>
<td>15</td>
<td></td>
<td>PROVIDER IDENTIFIER</td>
</tr>
<tr>
<td>9</td>
<td>PROVLNAME</td>
<td>Char</td>
<td>35</td>
<td></td>
<td>PROVIDER LAST NAME</td>
</tr>
<tr>
<td>8</td>
<td>PROVMNAME</td>
<td>Char</td>
<td>25</td>
<td></td>
<td>PROVIDER MIDDLE NAME</td>
</tr>
<tr>
<td>10</td>
<td>PROVPRE</td>
<td>Char</td>
<td>10</td>
<td></td>
<td>PROVIDER PREFIX</td>
</tr>
<tr>
<td>11</td>
<td>PROVSUF</td>
<td>Char</td>
<td>10</td>
<td></td>
<td>PROVIDER SUFFIX</td>
</tr>
<tr>
<td>12</td>
<td>PSCRSSN</td>
<td>Num</td>
<td>5</td>
<td>SSN11.</td>
<td>PROVIDER SCRAMBLED SSN</td>
</tr>
<tr>
<td>13</td>
<td>STA3N</td>
<td>Num</td>
<td>3</td>
<td>STA3NL.</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>STA6A</td>
<td>Char</td>
<td>6</td>
<td>$STA56L.</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>TEAM_PURPOSE</td>
<td>Num</td>
<td>2</td>
<td>PURPOSE.</td>
<td>PRIMARY CARE TEAM PURPOSE</td>
</tr>
</tbody>
</table>

According to our tabulation of FY10 entries, PROV_ROLE variable has the following values and frequency distribution:

<table>
<thead>
<tr>
<th>PROV_ROLE</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>AP</td>
<td>22638</td>
<td>41.92</td>
</tr>
<tr>
<td>CCM</td>
<td>5</td>
<td>0.01</td>
</tr>
<tr>
<td>PCP</td>
<td>31363</td>
<td>58.07</td>
</tr>
<tr>
<td>PM</td>
<td>1</td>
<td>0.00</td>
</tr>
<tr>
<td>TPA</td>
<td>1</td>
<td>0.00</td>
</tr>
</tbody>
</table>

The vast majority of the values are PCP (Primary Care Physician) and AP (Associate Provider). The TPA value refers to Transition Patient Advocate, a role used to track seriously ill Operation Iraqi Freedom/Operation Enduring Freedom (OIF/OEF) patients within special care teams. Patients identified for this program are assigned to such teams. CCM may refer to Chronic Care Module. This variable is also often left blank.

The variable PROVID2 is the same as PROVID but without the leading 3-digit station identifier.

---

8 See Appendix B
4. Decision Support System (DSS) SAS® Files

Decision Support System produces multiple SAS datasets based on data extracts from Vista, PAID, and other VA national databases. The SAS datasets contain computed volumes and costs of patient care at the encounter and clinical product level. DSS also includes patient demographics and clinical information, including diagnoses (ICD9 codes), procedures (CPT codes), and laboratory test values, as well as the ID of the provider who ordered or provided the service.

The DSS provider number consists of 11-characters. The leading character is “2,” to indicate that the data are from the VistA New Person File #200. This is followed by the Internal Entry Number (IEN). DSS also includes a provider type variable. This variable has the leading character “V” and is based on the VistA Person Class (from New Person File #200). VistA allows only one Person Class value.9

DSS data record the Primary Care Physician (PCP) as the primary care provider of record for the patient. This physician may not be involved in providing in all encounters with the patient. Therefore, some DSS datasets also contain an Ordering Provider (ord_prov) variable, which identifies the provider who ordered the particular care, e.g., a lab test or radiology procedure.

In all filenames, VISN## indicates the Veterans Integrated Service Network number, VISN01-VISN22 (see Appendix D).

4.1 Discharge (DISCH)

Filenames:

<table>
<thead>
<tr>
<th>Filename</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>RMTPRD.MED.DSS.SAS.FYyy.DISCH</td>
<td>DSS Discharge dataset</td>
</tr>
<tr>
<td>RMTPRD.MED.DSS.SAS.FYyy.VISN##.DISCH</td>
<td>DSS Discharge dataset by VISN</td>
</tr>
</tbody>
</table>

The Discharge dataset contains data about a patient’s stay, including admit date, diagnoses, patient demographics, costs of the stay incurred to each department of the medical center, length of stay, and discharge disposition data. Starting in FY11, the discharge file will include the identification number of the discharging physician.

The Discharge dataset contains the following provider-related variables (please note that other variables are not included here):

<table>
<thead>
<tr>
<th>#</th>
<th>variable</th>
<th>type</th>
<th>len</th>
<th>format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>pcp</td>
<td>char</td>
<td>11</td>
<td></td>
<td>Primary Care Provider</td>
</tr>
<tr>
<td>12</td>
<td>pcptyp</td>
<td>char</td>
<td>7</td>
<td></td>
<td>Provider Type</td>
</tr>
</tbody>
</table>

4.2 Lab Results (LAR)

Filenames:
RMTPRD.MED.DSS.SAS.FYyy.VISN##.LAR DSS Lab Results dataset

The Lab Results dataset contains data about a patient’s laboratory test results, including patient demographics, order date and result codes, and abnormality indicators. The Lab Results dataset contains the following provider-related variables (please note that other variables are not included here):

<table>
<thead>
<tr>
<th>#</th>
<th>Variable</th>
<th>Type</th>
<th>Len</th>
<th>Format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>31</td>
<td>ord_prov</td>
<td>Char</td>
<td>11</td>
<td></td>
<td>Ordering Provider</td>
</tr>
<tr>
<td>32</td>
<td>ord_prov_type</td>
<td>Char</td>
<td>7</td>
<td></td>
<td>Provider Type</td>
</tr>
<tr>
<td>20</td>
<td>pcp_dss</td>
<td>Char</td>
<td>11</td>
<td></td>
<td>Primary Care Provider</td>
</tr>
<tr>
<td>19</td>
<td>pcteam</td>
<td>Char</td>
<td>4</td>
<td></td>
<td>Primary Care Team</td>
</tr>
</tbody>
</table>

4.3 Lab Tests (LAB)

Filenames:
RMTPRD.MED.DSS.SAS.FYyy.VISN##.LAB DSS Lab Tests dataset

The Lab Tests dataset contains data about a patient’s laboratory test order, including patient demographics, order date and test codes. The Lab Tests dataset contains the following provider-related variables (please note that other variables are not included here):

<table>
<thead>
<tr>
<th>#</th>
<th>Variable</th>
<th>Type</th>
<th>Len</th>
<th>Format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>37</td>
<td>ord_prov</td>
<td>Char</td>
<td>11</td>
<td></td>
<td>Ordering Provider</td>
</tr>
<tr>
<td>38</td>
<td>ord_prov_type</td>
<td>Char</td>
<td>7</td>
<td></td>
<td>Provider Type</td>
</tr>
<tr>
<td>22</td>
<td>pcp_dss</td>
<td>Char</td>
<td>11</td>
<td></td>
<td>Primary Care Provider</td>
</tr>
<tr>
<td>21</td>
<td>pcteam</td>
<td>Char</td>
<td>4</td>
<td></td>
<td>Primary Care Team</td>
</tr>
</tbody>
</table>

4.4 Outpatient (OPAT)

Filenames:
RMTPRD.MED.DSS.SAS.FYyy.VISN##.OPAT DSS Outpatient dataset

The Outpatient dataset contains data about an outpatient encounter, including patient demographics, eligibility codes, various conditional flags, and visit costs. More extensive information is available in the Outpatient Encounters (SE) dataset in the NPCD database (discussed in detail below), which lists up to 10 providers associated with each encounter. The Outpatient dataset contains the following provider-related variables (please note that other variables are not included here):
### Table 11: OPAT provider-related variables

<table>
<thead>
<tr>
<th>#</th>
<th>Variable</th>
<th>Type</th>
<th>Len</th>
<th>Format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>43</td>
<td>pcp_dss</td>
<td>Char</td>
<td>11</td>
<td></td>
<td>Primary Care Provider</td>
</tr>
<tr>
<td>44</td>
<td>pcpt_dss</td>
<td>Char</td>
<td>16</td>
<td></td>
<td>PCP Provider Type</td>
</tr>
<tr>
<td>42</td>
<td>pct</td>
<td>Char</td>
<td>4</td>
<td></td>
<td>Primary Care Team</td>
</tr>
<tr>
<td>40</td>
<td>pid_dss</td>
<td>Char</td>
<td>11</td>
<td></td>
<td>Provider</td>
</tr>
<tr>
<td>41</td>
<td>pidt_dss</td>
<td>Char</td>
<td>7</td>
<td></td>
<td>Provider Type</td>
</tr>
</tbody>
</table>

The variable `pcpt_dss` above has 16 characters rather than 7, which is the norm for provider type variables (including the variable `pidt_dss` in the same file). The variable `pcpt_dss` is composed of the character “V”, followed by the standard 7 digit numerical provider code, padded with blanks. If the numeric portion of this variable is taken, then the `$PERCLAS` format can be applied.

#### 4.5 Pharmacy (PHARM)

**Filenames:**

RMTPRD.MED.DSS.SAS.FYyy.VISN##.PHA

DSS Pharmacy dataset

The Pharmacy dataset contains data on a pharmacy order, including patient demographics, order date and prescription number, departmental codes, and costs. The Pharmacy dataset contains the following provider-related variables (please note that other variables are not included here):

<table>
<thead>
<tr>
<th>#</th>
<th>Variable</th>
<th>Type</th>
<th>Len</th>
<th>Format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>35</td>
<td>ord_prov</td>
<td>Char</td>
<td>11</td>
<td></td>
<td>Ordering Provider</td>
</tr>
<tr>
<td>36</td>
<td>ord_prov_type</td>
<td>Char</td>
<td>7</td>
<td></td>
<td>Provider Type</td>
</tr>
<tr>
<td>22</td>
<td>pcp_dss</td>
<td>Char</td>
<td>11</td>
<td></td>
<td>Primary Care Provider</td>
</tr>
<tr>
<td>21</td>
<td>pcteam</td>
<td>Char</td>
<td>4</td>
<td></td>
<td>Primary Care Team</td>
</tr>
</tbody>
</table>

#### 4.6 Radiology (RAD)

**Filenames:**

RMTPRD.MED.DSS.SAS.FYyy.RAD

DSS Radiology dataset

RMTPRD.MED.DSS.SAS.FYyy.VISN##.RAD

DSS Radiology dataset by VISN

The Radiology dataset contains data on a radiology encounter, including patient demographics, test details, departmental codes, and costs. The Radiology dataset contains the following provider-related variables (please note that other variables are not included here):

<table>
<thead>
<tr>
<th>#</th>
<th>Variable</th>
<th>Type</th>
<th>Len</th>
<th>Format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>35</td>
<td>ord_prov</td>
<td>Char</td>
<td>11</td>
<td></td>
<td>Ordering Provider</td>
</tr>
<tr>
<td>36</td>
<td>ord_prov_type</td>
<td>Char</td>
<td>7</td>
<td></td>
<td>Provider Type</td>
</tr>
<tr>
<td>22</td>
<td>pcp_dss</td>
<td>Char</td>
<td>11</td>
<td></td>
<td>Primary Care Provider</td>
</tr>
<tr>
<td>21</td>
<td>pcteam</td>
<td>Char</td>
<td>4</td>
<td></td>
<td>Primary Care Team</td>
</tr>
</tbody>
</table>
4.7 Surgery (SUR)

Filenames:
RMTPRD.MED.DSS.SAS.FYyy.VISN##.SUR

DSS Surgery dataset

The Surgery dataset contains data on a surgery encounter, including patient demographics, surgery Current Procedural Terminology (CPT) codes, departmental codes, and costs. The Surgery dataset contains the following provider-related variables (please note that other variables are not included here):

<table>
<thead>
<tr>
<th>#</th>
<th>Variable</th>
<th>Type</th>
<th>Len</th>
<th>Format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>44</td>
<td>atdsur</td>
<td>Num</td>
<td>8</td>
<td></td>
<td>Attending Surgeon</td>
</tr>
<tr>
<td>45</td>
<td>atdsurpt</td>
<td>Char</td>
<td>7</td>
<td></td>
<td>Attend Surgeon Provider Type</td>
</tr>
<tr>
<td>48</td>
<td>ansup</td>
<td>Num</td>
<td>8</td>
<td></td>
<td>Anesthesia Supervisor</td>
</tr>
<tr>
<td>49</td>
<td>snsuppt</td>
<td>Char</td>
<td>7</td>
<td></td>
<td>Anesthesia Super Provider Type</td>
</tr>
<tr>
<td>20</td>
<td>pcp</td>
<td>Char</td>
<td>11</td>
<td></td>
<td>Primary Care Provider</td>
</tr>
<tr>
<td>19</td>
<td>pct</td>
<td>Char</td>
<td>4</td>
<td></td>
<td>Primary Care Team</td>
</tr>
<tr>
<td>46</td>
<td>prin</td>
<td>Num</td>
<td>8</td>
<td></td>
<td>Principal Anesthetist</td>
</tr>
<tr>
<td>47</td>
<td>prinpt</td>
<td>Char</td>
<td>7</td>
<td></td>
<td>Principal Anesthetist Provider Type</td>
</tr>
<tr>
<td>42</td>
<td>surg</td>
<td>Num</td>
<td>8</td>
<td></td>
<td>Surgeon</td>
</tr>
<tr>
<td>43</td>
<td>surpt</td>
<td>Char</td>
<td>7</td>
<td></td>
<td>Surgeon Provider Type</td>
</tr>
</tbody>
</table>

4.6 Treating Specialty (TRT)

Filenames:
RMTPRD.MED.DSS.SAS.FYyy.TRT
RMTPRD.MED.DSS.SAS.FYyy.VISN##.TRT

DSS Treating Specialty dataset
DSS TS dataset by VISN

The Treating Specialty dataset contains data on a patient encounter with the associated Diagnosis-Related Group (DRG), patient demographics, admit and discharge dates, departmental codes, and costs. The Treating Specialty dataset contains the following provider-related variables (please note that other variables are not included here):

<table>
<thead>
<tr>
<th>#</th>
<th>Variable</th>
<th>Type</th>
<th>Len</th>
<th>Format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>pcp_dss</td>
<td>Char</td>
<td>11</td>
<td></td>
<td>Primary Care Provider</td>
</tr>
<tr>
<td>9</td>
<td>pcptyp</td>
<td>Char</td>
<td>7</td>
<td></td>
<td>PCP Provider Type</td>
</tr>
</tbody>
</table>
5. VHA Medical SAS® Datasets

The VHA Medical SAS® Datasets are national administrative data for VHA-provided health care. The datasets are provided in SAS® format. Each file includes care provided in a single Federal fiscal year (the period from October 1 until September 30). These data are extracted from the National Patient Care Database (NPCD), a relational database maintained by the VHA Office of Information at the Austin Information Technology Center (AITC), the central repository for VA data.

The Inpatient Discharge (PTF) files do not contain provider-specific variables and are not discussed here.

5.1 Outpatient Events (SE)/Visits (SF)

Filenames:

- MDPPRD.MDP.SAS.SEyy: Outpatient CPT codes, patient demographics, and status indicators.
- MDPPRD.MDP.SAS.SFyy: Outpatient clinic stop codes, patient demographics, and status indicators.
- MDPPRD.MDP.SAS.SGyy: Outpatient diagnostic data (discontinued in 2001).

There currently are two Medical SAS® Datasets for outpatient care, Visit and Event. Two additional outpatient care datasets, Procedure and Diagnosis, were discontinued after FY2001 but are available for historical analysis.

These files also include the Provider Type variable described in the overview.

Beginning with FY2003, the provider type is represented in the VHA Medical SAS Event Dataset by a 6 character variable. The associated permanent SAS print format is now “$PERCLS.”.

These files allow up to 10 providers to be associated with a patient encounter, and have the following provider-related variables (please note that other variables are not included here):

---

10 For additional documentation, consult: http://www.virec.research.va.gov/DataSourcesName/Medical-SAS-Datasets/SASdocumentation.htm
Table 16: SE/SF/IE provider-related variables

<table>
<thead>
<tr>
<th>#</th>
<th>Variable</th>
<th>Type</th>
<th>Len</th>
<th>Format</th>
<th>Label</th>
</tr>
</thead>
<tbody>
<tr>
<td>107</td>
<td>NPROV</td>
<td>Num</td>
<td>2</td>
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<td>NUMBER OF PROV THIS SEGMENT</td>
</tr>
<tr>
<td>118</td>
<td>NPROVID</td>
<td>Num</td>
<td>8</td>
<td></td>
<td>NUMBER OF PROV IDS THIS SEGMENT</td>
</tr>
<tr>
<td>108</td>
<td>PROV1</td>
<td>Char</td>
<td>6</td>
<td>$PERCLS.</td>
<td>PROVIDER TYPE 1</td>
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<tr>
<td>109</td>
<td>PROV2</td>
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<td>6</td>
<td>$PERCLS.</td>
<td>PROVIDER TYPE 2</td>
</tr>
<tr>
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<td>6</td>
<td>$PERCLS.</td>
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</tr>
<tr>
<td>111</td>
<td>PROV4</td>
<td>Char</td>
<td>6</td>
<td>$PERCLS.</td>
<td>PROVIDER TYPE 4</td>
</tr>
<tr>
<td>112</td>
<td>PROV5</td>
<td>Char</td>
<td>6</td>
<td>$PERCLS.</td>
<td>PROVIDER TYPE 5</td>
</tr>
<tr>
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<td>PROV6</td>
<td>Char</td>
<td>6</td>
<td>$PERCLS.</td>
<td>PROVIDER TYPE 6</td>
</tr>
<tr>
<td>114</td>
<td>PROV7</td>
<td>Char</td>
<td>6</td>
<td>$PERCLS.</td>
<td>PROVIDER TYPE 7</td>
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<tr>
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<td>$PERCLS.</td>
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<tr>
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<tr>
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<tr>
<td>141</td>
<td>PROVID1</td>
<td>Char</td>
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<td></td>
<td>PROVIDER ID 1</td>
</tr>
<tr>
<td>142</td>
<td>PROVID2</td>
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<td>18</td>
<td></td>
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</tr>
<tr>
<td>143</td>
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<td>Char</td>
<td>18</td>
<td></td>
<td>PROVIDER ID 3</td>
</tr>
<tr>
<td>144</td>
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<td>Char</td>
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<td></td>
<td>PROVIDER ID 4</td>
</tr>
<tr>
<td>145</td>
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</tr>
<tr>
<td>146</td>
<td>PROVID6</td>
<td>Char</td>
<td>18</td>
<td></td>
<td>PROVIDER ID 6</td>
</tr>
<tr>
<td>147</td>
<td>PROVID7</td>
<td>Char</td>
<td>18</td>
<td></td>
<td>PROVIDER ID 7</td>
</tr>
<tr>
<td>148</td>
<td>PROVID8</td>
<td>Char</td>
<td>18</td>
<td></td>
<td>PROVIDER ID 8</td>
</tr>
<tr>
<td>149</td>
<td>PROVID9</td>
<td>Char</td>
<td>18</td>
<td></td>
<td>PROVIDER ID 9</td>
</tr>
<tr>
<td>150</td>
<td>PROVID10</td>
<td>Char</td>
<td>18</td>
<td></td>
<td>PROVIDER ID 10</td>
</tr>
</tbody>
</table>

5.2 Inpatient Encounters (IE)

Filenames:
- MDPPRD.MDP.SAS.IEyy: Inpatient CPT codes, patient demographics, and status indicators.
- MDPPRD.PRO.SAS.NAT.FYyy.IENAMEF: Real SSN Cross-walk for Patient Scrambled SSN. Made up of Inpatient Encounter Patients.

Initiated in 2005, this file lists VHA encounters that were recorded in the VistA patient care encounter (PCE) system while the patient was hospitalized. Inpatient is defined as patients in acute care, extended care, observation care, or non-VA care status. It is not a complete record of all encounters, and its completeness varies by site and fiscal year. Recent years are far more comprehensive than earlier years. It often contains more information of encounters that involve surgeries and procedures. It does not ordinarily include information on daily visits or consultations.

The IE files also allow up to 10 providers per patient encounter, and contain the provider-related variables listed in Table 16.
Appendix A. Access to VA National Datasets

VA users with permission can access the national data extracts. The Data Access Request Tracker (DART) is replacing the NDS e-mail based request/document submission process. The DART application was developed by VA Informatics and Computing Infrastructure (VINCI) in collaboration with NDS, VHA Privacy Office Health Information Access, VIReC, and others. Please see the NDS Research Data Sources site:

Additional information regarding data access can be found at

Time Sharing Option (TSO) account
Data at AITC are stored on an IBM S/390 mainframe computer using the z/OS operating system. Access to the AITC mainframe requires a TSO account. VA form 9957 is used to request creation of or modification to TSO accounts. This form and the instructions for completing it are available on the NDS Research Data Sources site.

Data with VA scrambled SSNs or local data with real SSNs
Access to data with VA scrambled SSNs or local (station) data with real SSNs requires a completed VA form 9957 with local approvals only; the form is not submitted to NDS. Each facility has a CUPS POC (Customer User Provisioning System Point of Contact, formerly called the ACRS POC), who provides assistance in completing VA form 9957. At many facilities, the CUPS POC is the facility ISO. To identify your CUPS POC, contact the AITC Service Desk at (888) 326-6780.

VISN or National data with real SSNs
Access to VISN or National data with real SSNs requires submission of a request packet to NDS, which includes a completed VA form 9957 with local approvals. NDS will send the request and supporting documents to VHA Privacy, VHA Security, and the VHA Office of Research and Development and other offices, as appropriate, for review and approval.

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.
Appendix B: Converting DSS Provider ID to NHCPD Provider ID (PROVID)

It is possible to convert the 11-character DSS provider variable format (e.g. ORD_PROV) to the 18-character provider identifier format (PROVID) used in the National Health Care Practitioner Database (NHCPD) and the Inpatient and Outpatient Encounter files. PROVID is an 18 digit character variable, where the first 3 digits are the code for medical center. The remaining 15 characters of this variable is the station-assigned provider number, with leading zeros.
ORD_PROV is a 10 digit character variable. The 3 digit code for medical center is not included. The first digit is usually a 2 to indicate the source of the data. The remaining characters are the station-assigned provider identifier. There are no leading zeros; the number is followed by blank characters.

The conversation is accomplished by applying the following SAS® statement in a data step that reads a DSS file, for example, the DSS laboratory orders file:

```
proc=put(sta3n,$3.) !!
put(input(substr(ord_prov,2,9),9.),z15.0);
```

(in some systems, the operator to concatenate strings is not !! but instead ||)

This accomplishes the following:

1. The variable for station (sta3n) is converted from numeric to a character variable.
   ```
   station=put(sta3n,$3.);
   ```

2. The leading character in the ordering provider number variable (ord_prov) is dropped (this may not need to be done at all sites see VIREC documentation). The number is also converted from a character to a numeric variable.
   ```
   provnumb=input(substr(ord_prov,2,9),9.0);
   ```

3. Leading zeros are added to the provider number and it is converted back to a character variable.
   ```
   provchar=put(provnumb,z15.0);
   ```

4. The characters for station are concatenated to the characters for provider number.
   ```
   provid2=station || provchar;
   ```

The source of DSS provider data is described in Chapter 6 of the 2008 DSS Medical Records Book:
http://vaww.dss.med.va.gov/DSS%20Documents/Medical%20Records/FY08%20Medical%20Records%20Book.doc

It lists the extracts that are the source of the data (see table 3, page 48, and table 4 page 51). DSS provider types are decoded on page 126. Please note that this is not a fully up-to-date list of codes, additional codes can be found in the VIREC Guide to the Outpatient Extracts.
### Appendix C: Team Purpose List

<table>
<thead>
<tr>
<th>Code</th>
<th>Team Purpose</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Super Team</td>
<td>A Super Team is defined as a team composed of two or more component teams. It may be called a &quot;Team of Teams.&quot; The ability to &quot;nest&quot; teams within a super team allows the facility to associate a number of specialty or other teams for scheduling, availability and other purposes.</td>
</tr>
<tr>
<td>2</td>
<td>Primary Care</td>
<td>The coordinated interdisciplinary provision of health care in regard to: (1) Intake and initial needs assessment, (2) Health promotion and disease prevention, (3) Management of acute and chronic biopsychosocial conditions, (4) Access to other components of health care, (5) Continuity, and (6) Patient and non-professional care giver education &amp; training.</td>
</tr>
<tr>
<td>3</td>
<td>Inpatient</td>
<td>A Team whose main purpose is to provide care for inpatients.</td>
</tr>
<tr>
<td>4</td>
<td>Mental Health Treatment</td>
<td>A Team consisting of Mental Health Clinicians and staff whose purpose is to provide services associated with Mental Health (Psychology/Psychiatry/Social Work, etc.)</td>
</tr>
<tr>
<td>5</td>
<td>Crisis / Rapid Response</td>
<td>A multi-disciplinary Team which is called in for immediate response to a &quot;Code&quot; (emergency assistance) or Psych crisis.</td>
</tr>
<tr>
<td>6</td>
<td>Community Care</td>
<td>Team members for Community Care work outside the VA facility and provide patient care via Community care centers set up by VA Medical Centers.</td>
</tr>
<tr>
<td>7</td>
<td>Special Treatment Program</td>
<td>Treatment programs of a confidential nature. Extra care should be exercised in regard to release of information and other facets of health care provision.</td>
</tr>
<tr>
<td>8</td>
<td>Sub Specialty (Med/Surg)</td>
<td>Treatment teams which are organized to provide Specialty (Medicine &amp; Surgery) and Subspecialty (Cardiology, Dermatology, Podiatry, Peripheral Vascular, etc) care. These teams follow certain patients, but also receive referrals from the Primary Care Practitioner.</td>
</tr>
<tr>
<td>9</td>
<td>Personal List</td>
<td>This is intended to be used for a single practitioner; however, it is possible to add additional members of the team who provide some kind of support (e.g., clerks, supervisors)</td>
</tr>
<tr>
<td>10</td>
<td>OIF OEF</td>
<td>A non-Primary Care Team that is used specifically for OIF and OEF Transition assistance. This information will be monitored and tracked by the VSSC.</td>
</tr>
</tbody>
</table>
Appendix D: 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.

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

*Originally, there were twenty-two VISNs, but VISN 13 and 14 merged to form VISN23 in January 2004.
## Appendix E: STA3N Code and Location

<table>
<thead>
<tr>
<th>STA3N Code</th>
<th>Location Details</th>
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</thead>
<tbody>
<tr>
<td>358</td>
<td>MANILA, PI</td>
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<tr>
<td>402</td>
<td>TOGUS, ME</td>
</tr>
<tr>
<td>405</td>
<td>WHITE RIVER JCT, VT</td>
</tr>
<tr>
<td>436</td>
<td>FORT HARRISON, MT</td>
</tr>
<tr>
<td>437</td>
<td>FARGO, ND</td>
</tr>
<tr>
<td>438</td>
<td>SIOUX FALLS, SD</td>
</tr>
<tr>
<td>442</td>
<td>CHEYENNE, WY</td>
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<td>459</td>
<td>HONOLULU, HI</td>
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<td>460</td>
<td>WILMINGTON, DE</td>
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<td>463</td>
<td>ANCHORAGE, AK</td>
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<tr>
<td>501</td>
<td>ALBUQUERQUE, NM</td>
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<td>502</td>
<td>ALEXANDRIA, LA</td>
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<td>ALTOONA, PA</td>
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<td>AMARILLO, TX</td>
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<td>ANN ARBOR, MI</td>
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<td>BECKLEY, WV</td>
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<td>518</td>
<td>BEDFORD, MA</td>
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<td>CHARLESTON, SC</td>
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<td>CHICAGO (W.SIDE), IL</td>
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<td>538</td>
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<td>CINCINNATI, OH</td>
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<td>CLARKSBURG, WV</td>
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<td>CLEVELAND-WADE PARK, OH</td>
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<td>COATESVILLE, PA</td>
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<td>ERIE, PA</td>
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<td>N. CALIFORNIA, CA</td>
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<td>618</td>
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<td>620</td>
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<td>MOUNTAIN HOME, TN</td>
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<td>MUSKOGEE, OK</td>
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