



NCDR®
NATIONAL CARDIOVASCULAR DATA REGISTRY



AMERICAN
COLLEGE of
CARDIOLOGY

American College of Cardiology National Cardiovascular Data Registry – Public Reporting Metric Data Download User's Guide

Purpose: This document is a user's guide for the American College of Cardiology (ACC) National Cardiovascular Data Registry (NCDR®) - Public Reporting Metric data download. It contains the file structure, record inclusion criteria, and a data dictionary.

Version and Change History:

Version	Effective Date	Notes/Changes
1.0	November 2, 2015	Initial creation of document.
2.0	November 14, 2016	Updated inclusion/exclusion criteria for CathPCI Public Reporting Metrics.
3.0	August 10, 2018	Updated to include Chest Pain – MI Registry™ Public Reporting Metrics.
3.1	April 1, 2021	Updated to include registry name change for ICD Registry to EP Device Implant Registry.
4.0	August 12, 2026	Updated to add a Quality of Care metric to the EP Device Implant Registry and CathPCI Registry.

A. Background

1. In order to facilitate further analysis and publication of data made public by the ACC through its Public Reporting Program, the ACC will provide downloadable data files for consumption by external entities.
2. Each data file will be accompanied by a user's guide intended to assist external entities in interpreting the structure and contents of the file.
3. For further support regarding the Public Reporting Program or the data download process please contact the ACC between the hours of 9 a.m. and 5 p.m. ET Monday through Friday.
 - a. By email at NCDR@acc.org. Please include your full name, institution name, address, phone number, a brief description of your inquiry (including the impacted registry) and use the subject line "CardioSmart Public Reporting".
 - b. By phone at 800-257-4737

B. File Content Description and Structure

1. The Public Reporting Metric data download contains only those facilities participating in at least one ACC registry public reporting program that met the submission eligibility criteria for at least one registry. Each line in this file is a metric score for one of the participating hospitals.

2. Note: To obtain further detailed information about each hospital (such as address, services provided, and ACC affiliated quality programs) link this file to the hospital list download using the Facility Linking ID field.
3. The set of hospitals contained in the download file is refreshed on a daily basis. Hospitals that opt into the public reporting program will be added to the list within approximately one business day. Hospitals whose registry contracts expire or otherwise opt out of the program will likewise be removed from the list within approximately one business day.
4. The file is a Microsoft Excel Comma Separated Values File (.csv).
5. The first row of data contains a header row with the column name of the field.
6. Each subsequent row within the file represents a unique site (i.e. hospital, cath lab, etc.) + registry (CathPCI, EP Device Registry, ChestPainMI) + metric ID number. The unique key will be the concatenation of the LinkingID + RegistryName + MetricID fields.

C. Data Dictionary

1. The table to follow describes each of the fields available in the Public Reporting Metric data download. Identifiers other than the FacilityLinkingID are self-reported by the facility. The ACC does not validate self-reported hospital information.

Col#	Column Header (Field Name)	Data Type	Len	Field Description	List of Values - Definition
1	FacilityLinkingID	Int	N/A	ACC assigned unique facility ID. This field can be used to link facilities between data downloads.	N/A
2	MPN	nvarchar	10	Medicare Provider Number (MPN). The MPN is issued by the Medicare Administrative Contractor's (MAC) Provider Enrollment Department to a provider of services upon initial certification for participation in the Medicare Program.	N/A
3	AHA	nvarchar	20	American Hospital Association (AHA) number. AHA has assigned a unique identification number for purposes of compiling and reporting information in various directories, databases, and reports.	N/A
4	NPI	nvarchar	20	National Provider Identifier (NPI) number. The NPI is a 10-position, intelligence-free numeric identifier (10-digit number). The Centers for Medicare & Medicaid Services (CMS) has developed the National Plan and Provider Enumeration System (NPPES) to assign these unique identifiers to organizations for efficiency in electronic transmission of health information.	N/A

Col#	Column Header (Field Name)	Data Type	Len	Field Description	List of Values - Definition
5	FacilityBrandedName	nvarchar	255	Facility (hospital) branded name as displayed to the general public.	N/A
6	RegistryName	nvarchar	50	Registry to which the metric being scored belongs.	• CathPCI = the NCDR CathPCI Registry®. • EP Device Registry = the NCDR EP Device Implant Registry™ • ChestPainMI = the Chest Pain – MI Registry™
7	MetricID	nvarchar	5	Metric ID for the metric that is being scored. Detailed explanation of each metric is available on the CardioSmart website. <u>Note:</u> The ID is only unique within a registry – not across all registries.	See Appendix A.
8	HospitalStars	nvarchar	1	Star score for the metric for the hospital. Details of the star scoring thresholds are available on the CardioSmart website.	• 1 = 1 * • 2 = 2* • 3 = 3* • 4 = 4* • 9 = Ineligible (Hospital did not meet the minimum case observation for this metric) CathPCI minimum >= 25 cases EP Device Registry minimum >= 11 cases Chest Pain minimum >= 40 cases
9	HospitalPValue	decimal	4.2	Estimated metric model P score for the hospital on which the star score was based.	N/A <u>Note:</u> This field will be Null if the HospitalStars field = 9 (Ineligible).
10	HospitalCILower	decimal	4.2	Lower end of the confidence interval estimates on the Hospital P score.	N/A <u>Note:</u> This field will be Null if the HospitalStars field = 9 (Ineligible).
11	HospitalCIUpper	decimal	4.2	Upper end of the confidence interval estimates on the Hospital P score.	N/A <u>Note:</u> This field will be Null if the HospitalStars field = 9 (Ineligible).
12	StateCode	nvarchar	2	State or province of the facility physical location.	See Appendix B <u>Note:</u> This field will be Null for metric = 0 which applies only to the hospital.

Col#	Column Header (Field Name)	Data Type	Len	Field Description	List of Values - Definition
13	StateStars	nvarchar	1	Star score for the metric for the state that the hospital is physically located in. Details of the star scoring thresholds are available on the CardioSmart website.	• 1 = 1 * • 2 = 2* • 3 = 3* • 4 = 4* • 9 = Ineligible (State did not meet the minimum case observation for this metric) CathPCI minimum >= 25 cases EP Device Registry minimum >= 11 cases Chest Pain minimum >= 40 cases <u>Note:</u> This field will be Null for metric = 0 which applies only to the hospital.
14	StatePValue	decimal	4.2	Estimated metric model P score for the state on which the star score was based.	N/A <u>Note:</u> This field will be Null if the StateStars field = 9 (Ineligible). <u>Note:</u> This field will be Null for metric = 0 which applies only to the hospital.
15	StateCILower	decimal	4.2	Lower end of confidence interval estimates on Hospital P score.	N/A <u>Note:</u> This field will be Null if the StateStars field = 9 (Ineligible). <u>Note:</u> This field will be Null for metric = 0 which applies only to the hospital.
16	StateCIUpper	decimal	4.2	Upper end of confidence interval estimates on Hospital P score.	N/A <u>Note:</u> This field will be Null if the StateStars field = 9 (Ineligible). <u>Note:</u> This field will be Null for metric = 0 which applies only to the hospital.
17	HospitalVolume	Int	N/A	The volume (count) of procedures performed by the site over the report calendar year.	N/A <u>Note:</u> This field will be populated only when the metric ID = 0

D. Appendix A: Metric Lists (Note that the Metric ID is only referenced in the csv file download and not on Find Your Heart a Home)

D.1 CathPCI Metric List: All metrics in this list are for RegistryName = CathPCI.

Metric ID	Metric Title	Metric Description
0	Number of PCI procedures performed during the calendar year.	The number of PCI procedures a site performs does not necessarily indicate higher quality, but it may be an indication of how experienced this site is with the procedure.
8	Use of Aspirin to reduce the chance of blood clots after PCI	Patients should be prescribed Aspirin to reduce the risk of heart attacks caused by blood clots in new stents after having a PCI – unless there is a reason not to use the medicine (such as an allergy). This score shows how well this facility is following this guideline – higher is better. Patients who cannot take aspirin are excluded.
9	Use of a P2Y12 inhibitor medication to reduce the chance of blood clots after PCI	Patients should be prescribed a P2Y12 inhibitor medication to reduce the risk of heart attacks caused by blood clots in new stents after having a PCI – unless there is a reason not to use the medicine (such as an allergy). This score shows how well this facility is following this guideline – higher is better. Patients who cannot take P2Y12 inhibitor medicines are excluded.
10	Use of a Statin to decrease cholesterol after PCI	Patients should be prescribed a Statin to decrease cholesterol and reduce the risk of heart attacks after having a PCI – unless there is a reason not to use the medicine (such as an allergy). This score shows how well this facility is following this guideline – higher is better. Patients who cannot take Statin medications are excluded.
38	Use of all recommended medications (Aspirin, P2Y12 inhibitor medication, and Statin) to reduce the chance of blood clots and decrease cholesterol after PCI	Patients should be prescribed Aspirin, a P2Y12 inhibitor medication, and a Statin medication after having a PCI to reduce the chance of blood clots, decrease cholesterol and reduce the risk of heart attacks – unless there is a reason not to use a medication(s) (such as an allergy). This score shows how well this facility is following this guideline – higher is better. Patients who cannot take all of the recommended medicines are excluded.
55	Quality of Care Composite	This is a weighted composite measure comprised of six component measures assessing mortality, bleeding, and acute kidney injury outcomes and guideline directed medical therapy, referral to cardiac rehabilitation, and PCI performed within 90 minutes for patients with acute myocardial infarctions.

**D.2 EP Device Implant Registry Metric List: All metrics in this list are for
RegistryName = EP Device Registry.**

Metric ID	Metric Title	Metric Description
0	Number of initial ICD implant and ICD replacement procedures performed during the calendar year.	The number of ICD implant procedures a site performs does not necessarily indicate higher quality, but it may be an indication of how experienced this site is with the procedure.
4	ICD/CRT-D patients with LVSD prescribed an ACE-I, ARB, or ARNI	Patients with less than normal heart function should be prescribed an ACE, ARB, or ARNI after receiving an ICD implant-unless there is a reason not to use the medicine (such as an allergy). Use of this medication may reduce the risk of death and hospital re-admission after this procedure. This score shows how well this facility is following this guideline - higher is better. Patients who cannot take these medications are excluded.
5	ICD/CRT-D patients with prior MI prescribed a beta blocker	Patients who have suffered a previous heart attack should be prescribed a Beta-blocker medication after receiving an ICD implant- unless there is a reason not to use these medicines (such as an allergy). Use of this medication may reduce the risk of death and hospital re-admission after this procedure. This score shows how well this facility is following this guideline - higher is better. Patients who cannot take beta-blocker medicines are excluded.
6	ICD/CRT-D patients with LVSD prescribed a beta blocker	Patients with less than normal heart function should be prescribed a Beta-blocker medication after receiving an ICD implant- unless there is a reason not to use the medicine (such as an allergy). Use of this medication may reduce the risk of death and hospital re-admission after this procedure. This score shows how well this facility is following this guideline - higher is better. Patients who cannot take beta-blocker medicines are excluded.
14	Composite: Discharge Medications (ACE-I/ARB/ARNI and beta-blockers) in Eligible ICD/CRT-D Implant Patients	Patients should be prescribed an ACE or ARB medication and a Beta-blocker medication after receiving an ICD implant- unless there is a reason not to use these medicines (such as an allergy). Use of these medications may reduce the risk of death and hospital re-admission after this procedure. This score shows how well this facility is following this guideline - higher is better. Patients who cannot take all of the recommended medicines are excluded.
40	Quality of Care Composite	The quality of care composite is an overall ranking of care, calculated using a statistical model. This score shows how well this facility is performing – higher is better.

D.3 ChestPainMI Metric List: All metrics in this list are for RegistryName = ChestPainMI.

Metric ID	Metric Title	Metric Description
0	Number of acute myocardial infarctions (MIs) treated during the calendar year.	The number of acute MIs does not necessarily indicate higher quality, but it may be an indication of how experienced this site is in caring for AMIs.
2	All Heart Attack Care	This rating reflects how a facility provides standard heart attack treatments to all types of heart attack patients at the right time during their hospitalization
3	Urgent Heart Attack Care	This rating reflects how a facility provides standard heart attack treatments to patients suffering heart attacks that typically require urgent treatment with a stent or medications and are later referred to cardiac rehabilitation.

E. Appendix B: State List of Values

#	Code	State/Province/Territory Name
1	AB	Alberta
2	AK	Alaska
3	AL	Alabama
4	AR	Arkansas
5	AS	American Samoa
6	AZ	Arizona
7	BC	British Columbia
8	CA	California
9	CO	Colorado
10	CT	Connecticut
11	DC	District of Columbia
12	DE	Delaware
13	FL	Florida
14	FM	Federated States of Micronesia
15	GA	Georgia
16	GU	Guam
17	HI	Hawaii
18	IA	Iowa
19	ID	Idaho
20	IL	Illinois
21	IN	Indiana
22	KS	Kansas
23	KY	Kentucky
24	LA	Louisiana
25	MA	Massachusetts
26	MB	Manitoba
27	MD	Maryland
28	ME	Maine
29	MH	Marshall Islands
30	MI	Michigan
31	MN	Minnesota
32	MO	Missouri

#	Code	State/Province/Territory Name
33	MP	Northern Mariana Islands
34	MS	Mississippi
35	MT	Montana
36	NB	New Brunswick
37	NC	North Carolina
38	ND	North Dakota
39	NE	Nebraska
40	NH	New Hampshire
41	NJ	New Jersey
42	NL	Newfoundland and Labrador
43	NM	New Mexico
44	NS	Nova Scotia
45	NT	Northwest Territories
46	NU	Nunavut
47	NV	Nevada
48	NY	New York
49	OH	Ohio
50	OK	Oklahoma
51	ON	Ontario
52	OR	Oregon
53	PA	Pennsylvania
54	PE	Prince Edward Island
55	PR	Puerto Rico
56	PW	Palau
57	QC	Quebec
58	RI	Rhode Island
59	SC	South Carolina
60	SD	South Dakota
61	SK	Saskatchewan
62	TN	Tennessee
63	TX	Texas
64	UM	United States Minor Outlying Islands
65	UT	Utah
66	VA	Virginia
67	VI	Virgin Islands

#	Code	State/Province/Territory Name
68	VT	Vermont
69	WA	Washington
70	WI	Wisconsin
71	WV	West Virginia
72	WY	Wyoming
73	YT	Yukon Territory