Data Dictionary   **Health IT Dashboard – Regional Extension Centers Program**   Last Updated: July 23, 2012
Office of the National Coordinator for Health IT (ONC)
U.S. Department of Health and Human Services (HHS)

Summary of Contents:

The ensuing table defines measures that are associated with the ONC Health IT Dashboard project, Regional Extension Center Dashboard, which is located at: http://dashboard.healthit.gov/rec/. The results of REC data analyses are included in two separate data files, located at http://dashboard.healthit.gov/data:

- "**REC_KPI_Masterfile**" - This file includes the data that are analyzed and summarized at the REC program or grantee-level. This dataset enables collaborative monitoring of the progress that RECs are making with respect to agreed upon goals.

- "**REC_State_and_County**" – This file includes a subset of the data that are analyzed and summarized at the state or county level. This dataset enables users to crosswalk

Contact information:

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Regional Extension Center Program
Office of Provider Adoption and Support
Office of the National Coordinator for Health IT

Contact information for each individual REC can be found in the Grantee List provided through the ONC HITECH Programs Grantee List, which is found here: http://dashboard.healthit.gov/data/.

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Office of Economic Analysis, Evaluation and Modeling (OEM)
Office of the National Coordinator for Health IT (ONC)
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Description:

The Regional Extension Center (REC) Program was created as part of the Health Information Technology for Economic and Clinical Health Act (HITECH). The purpose of the program is to promote the adoption and meaningful use of health information technology by providing information, guidance and technical assistance for health care providers implementing electronic health records (EHR) in their practice settings. The REC program has a performance-based reimbursement structure that compensates REC grantees for assisting primary care providers through three milestones along the path to meaningfully using EHR.

The performance milestones that qualify an REC for grant payment are: (1) a health care provider enrolls to receive assistance from a REC; (2) the provider "goes live" with an electronic health record (EHR) that has e-prescribing and quality reporting functionalities enabled; and (3) the provider or REC attests that the provider has met the Medicare and Medicaid EHR Incentive Program criteria for meaningful use of an EHR.

Each of the measures included in the tables below are analyzed according to each of the three grant payment milestones listed above. Accordingly, in the downloadable files, the pertinent REC milestone will be part of the measure name.

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Measure Area	Variable Name	Description	Summary Level
Key Indicators	Primary Care Provider Goal	The goal for the REC program or individual REC grantee.	REC Only
	Primary Care Prov	The number of REC registered primary care providers who have successfully met program goals, divided by the total program or grantee goal.	REC, State, County
	Percent to Primary Care Provider Goal	The number of REC primary care providers who have successfully met program goals, divided by the total program or grantee goal.	REC Only
	Total Prov	The total number of eligible health care providers that have enrolled with the REC for training and technical assistance launching an EHR and achieving meaningful use.	REC, State, County

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Measure Area	Variable Name(s)	Description	Summary Level
Provider Specialties	Total Prov w/ Adolescent Med and/or Pediatrics Specialties	Providers working with RECs self report their specialty. For summary purposes the following categories were created: Adolescent Medicine and Pediatrics; Family Practice; General Practice; Geriatrics; Obstetrics and/or Gynecology; Internal Medicine. For the portion of provider specialties that fall outside the above list, "Other Specialty" category is provided.	REC Only
	Total Prov w/ Family Practice Specialty		
	Total Prov w/ General Practice Specialty		
	Total Prov w/ Geriatrics Specialty		
	Total Prov w/ Gynecology And OBGYN Specialties		
	Total Prov w/ Internal Medicine Specialty		
	Total Prov w/ Other Specialty		

Measure Area	Variable Name(s)	Description	Summary Level
Practice Area Type	Total Prov from Micropolitan Areas / Small Cities	Micropolitan area is a core urban area or small city with more than 10,000 people but less than 50,000 people.	REC Only
	Total Prov from Rural Areas	Rural areas are located outside of a Core Based Statistical Area (CBSA).	REC Only
	Total Prov from Metropolitan Areas / Large Cities	Metropolitan area is a core urban area with 50,000 people or more.	REC Only
	Total Prov from Other Areas	A small proportion of REC-assisted providers are located in zip code areas that could not be matched to a Core Based Statistics Area (CBSA). These providers are excluded from the other area t	REC Only

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Measure Area	Variable Name(s)	Description	Summary Level
Practice Setting	Total Prov Affil w/ Practice Consortia	Defined as a group of formerly independent small practices joined together under a single tax ID to streamline administrative management.	REC Only
	Total Prov Affil w/ Critical Access and Rural Hospitals	Rural primary care hospitals that provide limited outpatient and inpatient hospital services in rural areas. CAHs offer services to Medicare patients and receive reimbursement from Medicare.	REC Only
	Total Prov Affil w/ Rural Health Clinics	Clinics receiving reimbursement from Medicare and Medicaid with the purpose of increasing access in rural areas that are medically underserved or suffer from a shortage of health professionals. Clinics must be staffed at least 50% of the time with midlevel practitioners.	REC Only
	Total Prov Affil w/ Community Health Centers	A clinic staffed by general practitioners and nurses that serves medically underserved areas and a patient population of persons who are insured, underinsured, low-income or those living in areas where access to primary care is limited.	REC Only
	Total Prov Affil w/ Public Hospitals	A hospital owned by a federal, state or local government and receives government funding.	REC Only
	Total Prov Affil w/ Small Practices	Small practices have 10 or less providers.	REC Only
	Total Prov Affil w/ Underserved settings	Other Underserved Settings are generally defined by RECs to include providers serving high levels of Medicaid and medically-underserved patients.	REC Only