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Date

2017-02-2

Title

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Market Saturation and Utilization Data Tool

The Centers for Medicare & Medicaid Services (CMS) has developed a Market Saturation and Utilization Data Tool, formerly called the Moratoria Provider Services and Utilization Data Tool, that includes interactive maps and a dataset that shows national-, state-, and county-level provider services and utilization data for selected health service areas. Market saturation, in the present context, refers to the density of providers of a particular service within a defined geographic area relative to the number of the beneficiaries receiving that service in the area.

The fourth release of the data tool includes a quarterly update of the data to the eight health services areas from release 3, and also includes Physical and Occupational Therapy and Clinical Laboratory (Billing Independently) data. Release 4 will therefore include four, twelve-month reference periods and the following health service areas: Home Health, Ambulance (Emergency, Non-Emergency, Emergency & Non-Emergency), Independent Diagnostic Testing Facilities (Part A and Part B), Skilled Nursing Facilities, Hospice, Physical and Occupational Therapy, and Clinical Laboratory (Billing Independently).

The Market Saturation and Utilization Data Tool can be used by CMS to monitor and manage market saturation as a means to prevent fraud, waste, and abuse. The data can also be used to reveal the degree to which use of a service is related to the number of providers servicing a geographic region. Provider services and utilization data by geographic regions are easily compared using an interactive map. There are a number of research uses for these data, but one objective of making these data public is to assist health care providers in making informed decisions about their service locations and the beneficiary population they serve. The tool is available through the CMS website at: https://data.cms.gov/market-saturation. Future releases may include comparable information on additional health service areas.

Methodology

The analysis is based on paid Medicare claims data from the CMS Integrated Data Repository (IDR). The IDR contains Medicare and Medicaid claims, beneficiary data, provider data, and plan data. Claims data are analyzed for a 12-month reference period, and results are updated quarterly to reflect a more recent 12-month reference period.

The Market Saturation and Utilization methodology is different from other public use data with respect to determining the geographic location of a provider. In this analysis, claims are used to define the geographic area(s) served by a provider rather than the provider's practice address. Further, a provider is defined as "serving a county" if, during the 12-month reference period, the provider had paid claims for more than ten beneficiaries located in a county. A provider is defined as "serving a state" if that provider serves any county in the state.
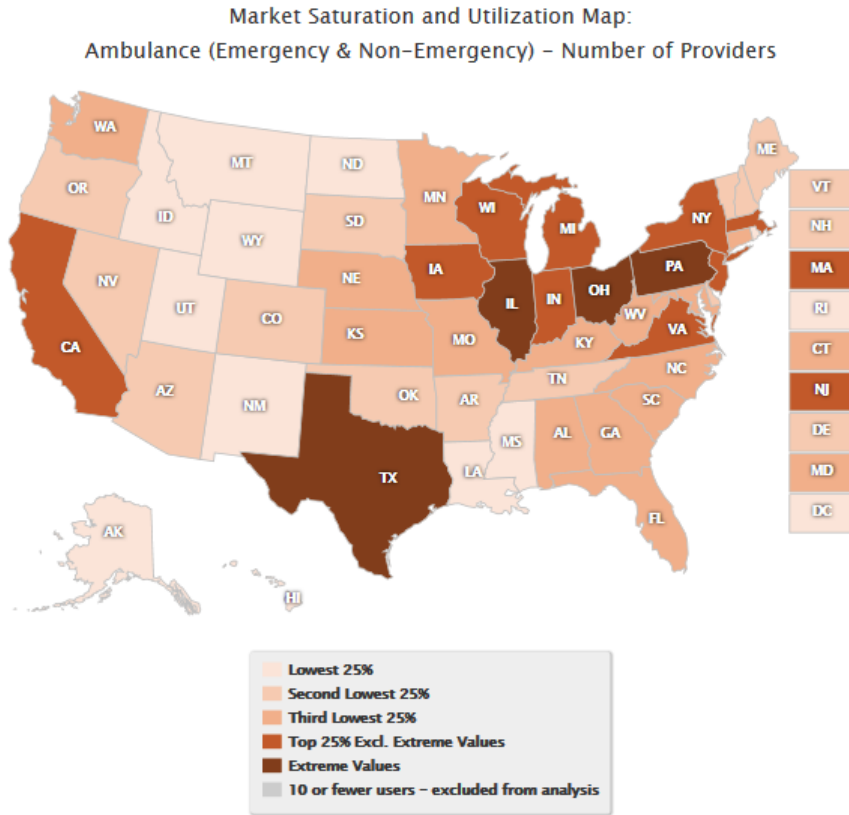
The Market Saturation and Utilization methodology is also different from other public use data with respect to determining the number of Medicare beneficiaries who are enrolled in a fee-for-service (FFS) program. In this analysis, a FFS beneficiary is defined as being enrolled in Part A and/or Part B with a coverage type code equal to "9" (FFS coverage) for at least one month of the 12-month reference period. There must not be a death date for that month or a missing zip code for the beneficiary so that the beneficiary can be assigned to a county. Other public use data may define a FFS beneficiary using different criteria, such as requiring the beneficiary to be enrolled in the FFS program every month during the reference period.

The Market Saturation and Utilization Data Tool includes an interactive map that is color-coded based on an analysis that separates the distribution into the following categories of states/counties for the selected metric: lowest 25 percent, second lowest 25 percent, third lowest 25 percent, top 25 percent excluding extreme values, and extreme values. An extreme value is one that greatly differs from other values in its field (e.g., Number of Providers). For those interested in states and counties affected by CMS' temporary provider enrollment moratoria during the reference periods for which data are available, the interactive map permits a visualization that identifies those states and counties. In this visualization, ambulance and home health service areas for moratoria versus non-moratoria states/counties are also identified based on color scheme. Counties that are excluded from the analysis are colored gray in the interactive map.

The examples below utilize the Ambulance (Emergency & Non-Emergency) service area data (selected for illustration purposes only). Similar maps can be created through the Data Tool for all of the health service areas included in the fourth release and for the four, twelve-month reference periods: 2014-10-01 to 2015-09-30, 2015-01-01 to 2015-12-31, 2015-04-01 to 2016-03-31, and 2015-07-01 to 2016-06-30.

Map 1 displays the distribution of providers by state for the Ambulance (Emergency & Non-Emergency) service area for the October 1, 2014 through September 30, 2015 reference period. This map utilizes a single color scale, which does not distinguish between moratoria and non-moratoria states.
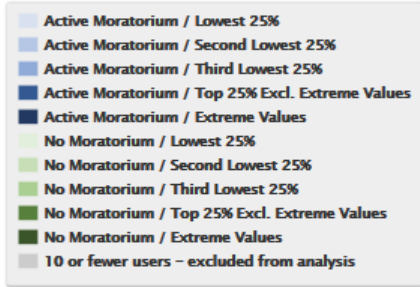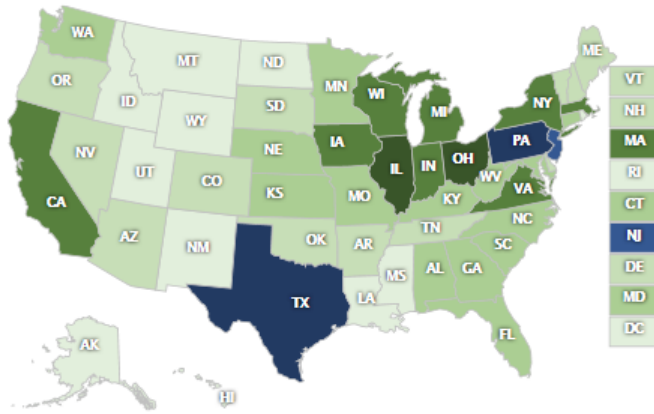
Map 1. Ambulance (Emergency & Non-Emergency):
National Distribution of Number of Providers
October 1, 2014 – September 30, 2015
Single Color Scale

Market Saturation and Utilization Map:
Ambulance (Emergency & Non-Emergency) – Number of Providers

Lowest 25%
Second Lowest 25%
Third Lowest 25%
Top 25% Excl. Extreme Values
Extreme Values
10 or fewer users – excluded from analysis

Map 2 displays the distribution of providers by state for the October 1, 2014 through September 30, 2015 reference period. This map utilizes a dual color scale, which distinguishes between moratoria and non-moratoria states.

Map 2. Ambulance (Emergency & Non-Emergency):
National Distribution of Number of Providers
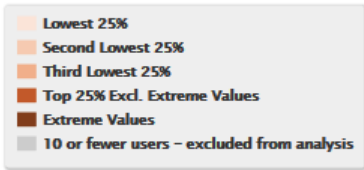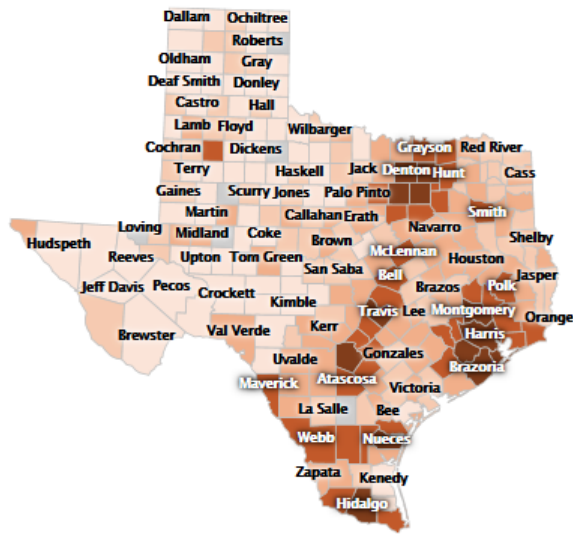October 1, 2014 – September 30, 2015
Color by Moratoria Status

Market Saturation and Utilization Map:
Ambulance (Emergency & Non-Emergency) – Number of Providers

- Active Moratorium / Lowest 25%
- Active Moratorium / Second Lowest 25%
- Active Moratorium / Third Lowest 25%
- Active Moratorium / Top 25% Excl. Extreme Values
- Active Moratorium / Extreme Values
- No Moratorium / Lowest 25%
- No Moratorium / Second Lowest 25%
- No Moratorium / Third Lowest 25%
- No Moratorium / Top 25% Excl. Extreme Values
- No Moratorium / Extreme Values
- 10 or fewer users – excluded from analysis

Map 3 drills down to the county level and displays the distribution of providers by county within the State of Texas for the October 1, 2014 through September 30, 2015 reference period. This map utilizes a single color scale, which does not distinguish between moratoria and non-moratoria counties.

Map 3. Ambulance (Emergency & Non-Emergency):
County Distribution of Number of Providers
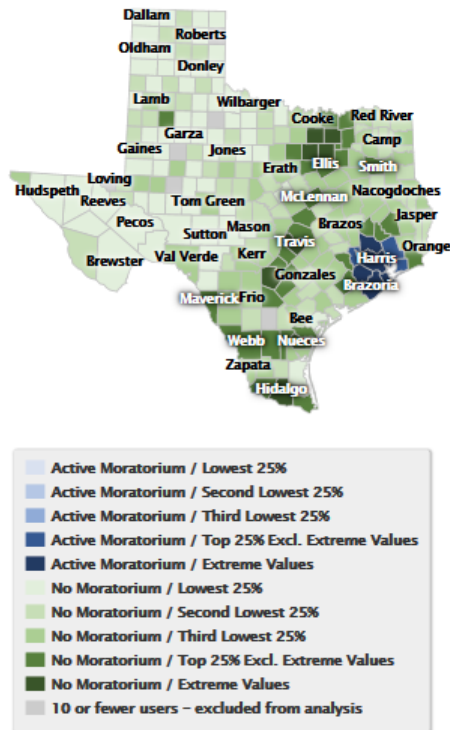October 1, 2014 – September 30, 2015
Single Color Scale

Market Saturation and Utilization Map:
Ambulance (Emergency & Non-Emergency) – Number of Providers

- Lowest 25%
- Second Lowest 25%
- Third Lowest 25%
- Top 25% Excl. Extreme Values
- Extreme Values
- 10 or fewer users – excluded from analysis

Map 4 drills down to the county level and displays the distribution of providers by county within the State of Texas for the October 1, 2014 through September 30, 2015 reference period. This map utilizes a dual color scale, which distinguishes between moratoria and non-moratoria counties.

Map 4. Ambulance (Emergency & Non-Emergency):
County Distribution of Number of Providers
October 1, 2014 – September 30, 2015
Color by Moratoria Status

Market Saturation and Utilization Map:
Ambulance (Emergency & Non-Emergency) – Number of Providers

Legend:
- Active Moratorium / Lowest 25%
- Active Moratorium / Second Lowest 25%
- Active Moratorium / Third Lowest 25%
- Active Moratorium / Top 25% Excl. Extreme Values
- Active Moratorium / Extreme Values
- No Moratorium / Lowest 25%
- No Moratorium / Second Lowest 25%
- No Moratorium / Third Lowest 25%
- No Moratorium / Top 25% Excl. Extreme Values
- No Moratorium / Extreme Values
- 10 or fewer users – excluded from analysis

Similar maps can be created at the national- and state-level for the other metrics included in the Data Tool: Number of FFS Beneficiaries, Average Number of Users per Provider, Percentage of Users out of FFS Beneficiaries, and Average Number of Providers per County.

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