

**File Name:** Hospital Address Info.xlsx

**Source:** <https://www.cms.gov>

**Description:** File contains a list of Providers and their descriptions.

**Potential Usage:** Reference data for analysis on Providers.

**Notes:**

- Please contact Dr. Mohan Tanniru ([tanniru@oakland.edu](mailto:tanniru@oakland.edu)) for your inquiries.

**List of Fields:**

Field Name	Description
PROVIDER_NUMBER	Provider Number
FYB	Fiscal Year Begin
FYE	Fiscal Year End
STATUS	Cost Report Status
CTRL_TYPE	Provider Control Type (reference Provider_Control_Type_Code.xlsx for code description)
Hosp_Name	Hospital Name
Street_Addr	Hospital Street Address
Po_Box	Hospital PO BOX
City	Hospital City
State	Hospital State
Zip_Code	Hospital Zip Code
County	Hospital County
Urban1_Rural2	Urban (1) or Rural (2)