

All Vermont Acute Care Community Hospitals

Table 2B - Counts of Top 2017 Outpatient Procedures

Procedures displayed include the number of cases for each community hospital's top outpatient surgical procedures by volume for the period of 10/1/2016 to 9/30/2017. Hospital System Number of Cases and Average Gross Charges include all hospitals. For individual hospitals, procedures having fewer than 15 cases are not shown. Blanks in the table indicate that the hospital has fewer than 15 cases for that procedure or the hospital does not perform that procedure. The hospital, however, may perform a similar procedure under a different code which may not be shown. Please call the hospital for more information. Note: the surgical cases shown include some anesthetic procedures for the treatment of pain not connected with surgery.

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\* "Clinical Classification System" (CCS) groups similar CPT codes, such as all those affecting a given organ system of the body.

"No data" indicates that no procedure in that particular grouping meets the minimum limits based on the methodology described above.

Outpatient Procedures		Hospital System		Vermont Community Hospitals - Counts Displayed Include Each Hospital's Top Outpatient Procedures By Volume														
CCS High-level Group <sup>1</sup>	CCS Single-level Category	System Number of Cases <sup>2</sup>	System Average Gross Charges <sup>3</sup>	Brattleboro Memorial Hospital	Central Vermont Medical Center	Copley Hospital	Gifford Medical Center	Grace Cottage Hospital	Mt Ascutney Hospital	North Country Hospital	Northeastern Vermont Regional Hospital	Northwestern Medical Center	Porter Medical Center	Rutland Regional Medical Center	Southwestern Vermont Medical Center	Springfield Hospital	University of Vermont Medical Center	
<b>CCS 1: Operations on the nervous system</b>																		
5	Insert cath, spinal stimulator, inject into spinal canal	4,248	\$1,787		463	118	29		46	158	133	247		806	444		1,804	
6	Decompression peripheral nerve	1,620	\$4,966	99	157	105	49			86	94	161	55	188	30	74	522	
7	Other diagnostic nervous system procedures	2,525	\$1,648											602			1,894	
8	Other non-OR or closed therapeutic nerv syst procs	2,316	\$4,056		242	71			17	52	125			303	16		1,467	
9	Other OR therapeutic nervous system procedures	1,798	\$7,830		26						75			199			1,455	
<b>CCS 3: Operations on the eye</b>																		
15	Lens & cataract procedures	4,319	\$6,074	448	624	91	177		361	375	415	316	408	349		148	607	
19	Other therapeutic procedures on eyelids, conjunctiva, cornea	370	\$5,558										30	25			296	
21	Other extraocular muscle & orbit therapeutic procedures	108	\$7,883				51										57	
<b>CCS 4: Operations on the ear</b>																		
23	Myringotomy	798	\$3,530		41					20	20		42	114	20	16	522	
26	Other therapeutic ear procedures	2,095	\$1,510	56										1,243			780	
<b>CCS 5: Operations on the nose, mouth, and pharynx</b>																		
30	Tonsillectomy and/or adenoidectomy	557	\$6,948		65					38	17		45	96	26	26	241	
31	Diagnostic procedures on nose, mouth & pharynx	1,876	\$825		18					20	15			937	21		844	
33	Other OR therapeutic procedures on nose, mouth & pharynx	346	\$10,759		28					17			32	54			198	
<b>CCS 6: Operations on the respiratory system</b>																		
35	Tracheoscopy & laryngoscopy with biopsy	1,518	\$690		40									908			564	
38	Other diagnostic procedures on lung & bronchus	9,706	\$820	240	492	83	145		100	544	286	531	47	898	1,685	292	4,363	
<b>CCS 7: Operations on the cardiovascular system</b>																		
48	Insert, revis, replacet, rem pacemaker or cardioverter/defib	1,843	\$9,254		296		44			363	43	178		82		97	724	
54	Other vascular catheterization, not heart	998	\$10,772	18	80					15	23			96	80		659	
62	Other diagnostic cardiovascular procedures	537	\$4,631	86	55									130	54		203	
63	Other non-OR therapeutic cardiovascular procedures	3,217	\$1,422	91	105	58				229	689	169	81	460	280	75	971	

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<b>CCS 9: Operations on the digestive system</b>																	
69	Esophageal dilatation	505	\$4,726	66	54									54			280
70	Upper gastrointestinal endoscopy, biopsy	5,420	\$3,362	229	469	134	73		151	164	115	589	113	507	551	196	2,129
76	Colonoscopy & biopsy	24,131	\$3,694	1,071	2,531	776	413		646	866	867	1,690	1,220	2,175	2,658	833	8,385
77	Proctoscopy & anorectal biopsy	625	\$1,727	31	34	24						23		42	38	30	369
81	Hemorrhoid procedures	211	\$4,788									23		18			98
84	Cholecystectomy & common duct exploration	947	\$13,484	41	113	36			28	53	43	141	35	105	109	46	184
85	Inguinal & femoral hernia repair	1,072	\$12,000	61	114	49	31		30	49	41	107	55	125	102	42	266
86	Other hernia repair	870	\$11,198	31	72	18			20	48	45	116	33	100	107	28	241
88	Abdominal paracentesis	371	\$2,068	26						23		15		40	87		152
91	Peritoneal dialysis	2,632	\$10,575												128		2,504
<b>CCS 10: Operations on the urinary system</b>																	
100	Endoscopy & endoscopic biopsy of the urinary tract	1,344	\$2,560	104	32						22			335	20		774
107	Extracorporeal lithotripsy, urinary	834	\$13,762	33	126	34	35				18	24	29	136	78	35	286
108	Indwelling catheter	484	\$425	33		48								63			329
111	Other non-OR therapeutic procedures of urinary tract	763	\$1,006			53								91			607
112	Other OR therapeutic procedures of urinary tract	302	\$10,007		21		31							52			139
<b>CCS 11: Operations on the male genital organs</b>																	
115	Circumcision	310	\$4,239		49						19	21	32		21	28	107
<b>CCS 12: Operations on the female genital organs</b>																	
124	Hysterectomy, abdominal & vaginal	636	\$21,995	22		17				52	24	57	34	44	39	23	313
125	Other excision of cervix & uterus	409	\$9,121	37		30					17	86	17	42	71		72
130	Other diagnostic procedures, female organs	3,005	\$2,141	83	787		15			35		67	26	346	1,219	39	362
131	Other non-OR therapeutic procedures, female organs	615	\$2,035											343			259
132	Other OR therapeutic procedures, female organs	369	\$10,350	19		16				38		30		32	20		190
<b>CCS 13: Obstetrical procedures</b>																	
139	Fetal monitoring	4,006	\$784	491	623	348	191				237	304	58	46	109	194	1,288

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<b>CCS 14: Operations on the musculoskeletal system</b>																	
143	Bunionectomy or repair of toe deformities	497	\$12,114		32	23	72				31	42	18	35	30	20	172
145	Treatment, fracture or disloc of radius & ulna	453	\$15,041	22	60	31				17	25	45	28	58	25	20	111
147	Treatment, fracture or disloc of lower extremity	474	\$15,566	24	40	46	17			19		35		76	37		143
151	Excision of semilunar cartilage of knee	1,115	\$9,520	137	89	89	44				62	77	34	117	82	36	335
155	Arthrocentesis	5,167	\$700	602	23					37			34	2,137			2,315
156	Injections & aspirations of muscles, tendons, etc.	1,252	\$1,317	36	180				16		19			249			729
160	Other therapeutic procedures on muscles & tendons	2,640	\$10,580	172	225	238	81			102	160	257	61	336	157	55	793
161	Other OR therapeutic procedures on bone	648	\$11,712	24	40	50	17				16	39	22	52	39		331
162	Other OR therapeutic procedures on joints	1,069	\$13,999	64	57	126	25			27	48	41	24	117	60	43	434
<b>CCS 15: Operations on the integumentary system</b>																	
165	Breast biopsy & other diagnostic procedures on breast	1,153	\$4,213	45	122		19		18	19		43	35	122	150	21	559
166	Lumpectomy, quadrantectomy of breast	380	\$9,936	25	71									53	69		117
169	Debridement of wound, infection or burn	366	\$1,891	113										87			138
170	Excision of skin lesion	4,556	\$2,417	110	87	109	28			36	39	248	18	150	101	24	3,595
172	Skin graft	659	\$7,781	115										24	23		447
173	Other diagnostic proc on skin & subcutaneous tissue	233	\$1,081											160			36
174	Other non-OR therapeutic procedures on skin & breast	3,668	\$552			1,335					310	18		46			1,918
Sorted by CCS procedure groups and alphabetically by Hospital. Data source: the Vermont Uniform Hospital Discharge Data Sets as of January 2019. Please see the Act 53 Pricing FAQs for more information. Grace Cottage Hospital has no procedures with 15 or more cases. <sup>1</sup> Based on "Current Procedural Terminology" (CPT) codes that define outpatient procedures for the period October 1, 2016 through September 30, 2017. "Clinical Classification System" (CCS) groups similar CPT codes, such as all those affecting a given organ system of the body. <sup>2</sup> System Number of Cases includes the number of cases for all hospitals with charges. Records with zero charges are not included. <sup>3</sup> System Average Gross Charge is an average based on all hospital cases with charges.																	